



June 18, 2020

U.S. Environmental Protection Agency

Document Processing Desk - 6(a)(2)

Office of Pesticide Programs - 7504P

Room S-4900, One Potomac Yard

Arlington, VA 22202-4501

SUBJECT: 6(a)(2) Incidents Accumulated for Month of May, 2020

Dear Sir/Madam:

Please find additional Bayer Animal Health Division 6(a)(2) incidents accumulated during the month of May, 2020. These incidents are being submitted in accordance with FIFRA Section 6(a)(2).

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730,

if I can provide any additional information, or to be any further assistance.

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: Bayer report nos:

2020-US0018498, 2020-US0019698, 2020-US0019790, 2020-US0021455, 2020-US0022906





June 18, 2020

Adverse Effects Coordinator

Department of Pesticide Regulation

Pesticide Registration Branch

1001 I Street, PO Box 4015

Sacramento, CA 95812-4015

SUBJECT: 6(a)(2) Incidents Accumulated for Month of May, 2020

CCR Section 6210 Submission

Adverse Events Coordinator:

Enclosed please find Bayer's letters addressed to the U.S. EPA with the descriptions of Animal Health incidents attached and submitted to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated June 18, 2020 with attachments.





June 18, 2020
Labelle Hicks, Ph.D. DABT
Maine Board of Pesticides Control
28 Statehouse Station
Augusta, ME 04333

SUBJECT: 6(a)(2) Incidents Accumulated for Month of May, 2020.

Dear Dr. Hicks:

Enclosed please find Bayer's letters addressed to the U.S. EPA with the descriptions of Bayer Animal Health incidents attached and submitted pursuant

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated June 18, 2020 with attachments.





June 18, 2020

Paula McBath, Environmental Chemist II

Pesticide Product Registration Section

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-7257

SUBJECT: 6(a)(2) Incidents for Month of May 2020 Section 326.14 (f) Reporting

Dear Paula McBath:

Enclosed please find Bayer's letters addressed to the U.S.

EPA with the descriptions of Animal Health incidents attached and submitted

pursuant to FIFRA 6(a)(2).

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730,

if I can provide any additional information, or to be any further assistance.

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated June 18, 2020 with attachments.



Science For A Better Life



June 18, 2020

Mr. Kevin Haack

Texas Department of Agriculture

Pesticide Registration Program

Stephan F. Austin Building

1700 No. Congress Ave., Austin, TX 78701

SUBJECT: 6(a)(2) Incidents Accumulated for Month of May, 2020

Dear Mr. Haack:

Enclosed please find Bayer's letters addressed to the U.S. EPA with the descriptions of Animal Health incidents attached and submitted pursuant to FIFRA 6(a)(2).

Please feel free to contact me at chris.ensley@bayer.com or at 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated June 18, 2020 with attachments.

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390 Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row I Administrative	Administrative Ms Sherry Oakley		Submission date.		son (if differe Applicabl	Internal ID # 2020-US0018498		
Data			06-18-2020		The political and a second second		2020-030010490	
	Address 1901 S Lombard Ave EVANSVILLE Indiana 47714 USA			Address USA				
	Phone #	812573139	97	Phone #				
	Incident Status: Location and dat		e of incident.	Date registra became awar incident.		Was incident pa	rt of larger study ?	
	1f update,include date of original submission 04-29-2020			05-04-	-2020		No	
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556-155		EPA Registration # (EPA Registration # (Product 2)		EPA Registration # (Product 3)		
	A.I.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	A.I. (s)		
	Product 1 name Seresto (unspecified)		Product 2 name		Pro	Product 3 name		
	Exposed to concentrate prior to dilution?		Exposed to concentrate prior to dilution?		ution ? Ex	? Exposed to concentrate prior to dilution ?		
	Formulation Colla	r	Formulation		For	Formulation		
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse No	school, industrial surface water, con building/office, for	1, nursery/ greenhouse, in mmercial turf, a prest/woods, agricultural in management of the state		Situation (act of using product): (examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).		ntry, epair, quipment,	
	Applicator certified PCO?	Ноте		See Incident Description Note			ription Notes	
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident	Brief description	of incident circumstan	ces	<u> </u>			
	Description							

Version: unapproved

Page 2 of 3

Internal ID # 2020-US0018498
Brief description of incident circumstances

On 28-Apr-2020, a 66 year old, 150 pound, woman, in unknown condition, with the concomitant medical conditions of allergies, asthma, type II diabetes, hypertension and a thyroid cyst, self administered tiotropium bromide, mometasone furoate and formoterol fumarate, cetirizine, montelukast, thyroxine and losartan since approximately 2020, was secondarily exposed to an unknown amount of a Seresto Cat (Flumethrin-Imidacloprid) collar and an unknown amount of a Seresto Small Dog (Flumethrin-Imidacloprid) collar on the skin when she applied the collars to her 2 dogs and 2 cats and 1 cat frequently sat in her lap.

On 29-Apr-2020, the individual experienced generalized hives and pruritus. She self administered 50 mg of diphenhydramine approximately 3 times daily and the clinical signs improved but continued.

On O4-May-2020, after the individual took a shower, the generalized hives and pruritus resolved. She recovered without medical intervention.

No further information is expected. The case is closed.

Version: unapproved

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate

Provide an known, required information.	r required data meia information is ur	iknown, designate as such in appr	opriate area. Page 3 of 3
Demographic information: Age: 66 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Female			
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	1 Days	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect: Urticaria Pruritus	s	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:	1		
Amount of pesticide:			
Unknown per 1			
Expose duration:			
6 Day(s)			
Patient weight:			
150 Pounds			
Human severity category			
H-C			
		Γ	
		and the state of t	Internal ID#
			2020-US0018498

Version: unapproved

Page 1 of 3

Row 1	Reporter Name		Submission	Sion Contact person (if different than reporter)		Internal ID#		
Administrative Data	Mr Mark Schvard	72	date. 06~18~2020	Not Applicable		2020-US0019698		
	Address 91 W ST MARYS RD WILKES BARRE Pennsylvania 18706 USA			Address USA				
	Phone #	(570) 855-3	3035	Phone #				
	Incident Status: New If update, include date of original submission				re of	Was incident pa	rt of larger study ?	
	01,50101 000111311011	04-15-2020		05-08-	-2020			
Row2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556-155		EPA Registration # 6	EPA Registration # (Product 2)		EPA Registration # (Product 3)		
	A.I.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	. (s)		
	Product I name	Product 2 name			duct 3 name			
	Seresto Small Dog							
	Exposed to concentrate prior to dilution?		Exposed to concentrate prior to dilution?		ution? Exp	? Exposed to concentrate prior to dilution ?		
	Formulation Colla		Formulation		For	Formulation		
Row 3 Incident Circumstances	Evidence label directions were not followed? school, industrial surface water, corbuilding/office, fo		l, nursery/greenhouse, include mmercial turf, applic prest/woods, agricultural maint		including m application, maintenanc	Situation (act of using product):(examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).		
	Applicator certified PCO?		Home		See Ir	icident Desc	ription Notes	
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	ces	<u> </u>		3		

Version: 13-May-2020 at 14:20

Page 2 of 3

Internal ID # 2020-US0019698
Brief description of incident circumstances

On approximately 01-Apr-2020, a 51 year old, man, in unknown condition, with no known concomitant medical conditions, was secondarily exposed to an unknown amount of a Seresto Small Dog (Flumethrin-Imidacloprid) collar on the skin when his dog would rub against him after product application.

On approximately 15-Apr-2020, the individual experienced edema on the right side of the face and a swollen lip. He was examined by a physician and started on an unspecified steroid to be administered for 5 days. The individual also self administered diphenhydramine.

On approximately 16-Apr-2020, the clinical signs resolved and the diphenhydramine was discontinued.

On approximately 20-Apr-2020, the unspecified steroid was discontinued.

On O8-May-2020, he experienced edema on the left side of his face and a recurrence of a swollen lip. He self administered an unspecified steroid and the clinical signs continued unchanged.

Version: 13-May-2020 at 14:20

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Demographic information; Age: 51 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Male Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
	If yes, days lost due to illness:	2 Weeks *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect: Allergic oedema Allergic oedema	S	If lab tests were performed, list test names and results(If available submit report). None reported
7			
Exposure data:			
Amount of pesticide:			
Unknown per 1			
Expose duration:			
1 Days			
Patient weight:			
Unknown			
Human severity category			
H-C			
This box can be used to provide any expl	100 - 100 - 100	31. A. 1. 13. A / 13. A 31ki	
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			Internal ID #
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			2020-US0019698

^{*} approximate

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row I Administrative	dministrative Ms Sarah L		Submission date.	Contact person (if different that Not Applicable			
Data			06-18-2020	Noc	, (pp : 1000 :	. •	2020-US001979
	Address USA			Address USA			
	Phone #			Phone #			
		215-514-15	545				
	Incident Status: Location and date New		e of incident.	Date registrant became aware of incident.		Was incident part of larger study?	
	If update, include date of original submission 05-03-2020			05-08-2020			No
Row 2 Pesticide(s) Involved	EFA Registration # (Product 1) 11556-155		EPA Registration #	PA Registration # (Product 2)		EPA Registration # (Product 3)	
	A.L.(s) Flumethrin-Imid	A.I. (s)		A.I	A.Y. (s)		
	Product 1 name Seresto Small D	Product 2 name		Pro	Product 3 name		
	Exposed to concentrate p	rior to dilution ?	Exposed to concentr	ate prior to dil	ution ? Ex	posed to concentr	ate prior to dilution ?
	Formulation Colla	r	Formulation			Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse No	idence label directions re not followed? Yes tentional misuse Incident site: (Exschool, industrial surface water, collowed) building/office, for (specify crop), ri		I, nursery/greenhouse, include mmercial turf, applications for a pricultural maintenance.		Situation (act of using product): (examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).	
	Applicator certified PCO?		Home	See Incident Description Notes			
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident	Brief description	of incident circumstar	ces			
	Description						

Version: 13-May-2020 at 17:25

Page 2 of 3

Internal ID # 2020-US0019790 Brief description of incident circumstances

On approximately 08-Apr-2020, a 20 year old, 100 pound, woman, in unknown condition, with no known concomitant medical conditions, was secondarily exposed to an unknown amount of a Seresto Small Dog (Flumethrin-Imidacloprid) collar on the hands when she placed the collar on her pet and had daily contact with the pet.

On approximately 03-May-2020, the individual experienced generalized pruritus.

On O7-May-2020, she attended a virtual consult with her physician. It was determined she experienced contact dermatitis and was started on an unspecified steroid to be applied topically. The clinical signs continued.

Version: 13-May-2020 at 17:25

Provide all known, required information. I	f required data field information is ur	iknown, designate as such in appr	opriate area. Page 3 of 3
Demographic information: Age: 20 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex:Female		Buildian Indian	•
Occupation (if relevant)	Other	No	
If female, pregnant?	Was exposure occupational?	Time between exposure and onset of symptoms:	
No	If yes, days lost due to illness:	25 Days *	_
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, liospital inpatient) unknown topical steroid	List signs/symptoms/adverse effect Pruritus Dermatitis and eczema	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:			
Amount of pesticide: Unknown per 1			
Expose duration:			
0 Days			
Patient weight:			
100 Pounds			
Human severity category			
H-C			
This box can be used to provide any expla	anatory or qualifying information su	rrounding the incident (add addit	onal pages if necessary)
		r	
			Internal ID #
			3030 460010700
			2020-US00 1 9790

Page 1 of 3

Row I	Reporter Name		Submission	Contact per:	son (if differe	nt than reporter)	Page 1 of 3
Administrative Data	Ms Amy Sampson		date. 06-18-2020	Not Applicable		2020-US0021455	
	Address 2 Marsh Ave CHARLTON DEPOT Massachusetts 015091 USA			Address			
	Phone #	978-417-11	.75	Phone #			
	Incident Status: Location and date New		of incident.	Date registra became awar incident.		Was incident pa	rt of larger study ?
	If update, include date of original submission 05-11-2020			05-15-	2020		No
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556-155		EPA Registration # (EPA Registration # (Product 2)		EPA Registration # (Product 3)	
	A.L.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	A.I. (s)	
	Product I name Seresto Cat		Product 2 name			duct 3 name	
	Exposed to concentrate p	Exposed to concentrate prior to dilution?			posed to concentr	ate prior to dilution?	
	Formulation Colla	r	Formulat ion			Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Incident site: (Ex school, industrial surface water, con building/office, for		l, nursery/greenhouse, includi mmercial turf, applier prest/woods, agricultural mainte		including m application, maintenance	Situation (act of using product): (examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).	
	Applicator certified PCO?		Home Sec		See Ir	ncident Desc	ription Notes
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff).	Brief description	of incident circumstan	ces			
	See Incident Description						

Version: 20-May-2020 at 18:20

Page 2 of 3

Internal ID # 2020-US0021455
Brief description of incident circumstances

On O9-May-2020, a woman, in unknown condition, with no known concomitant medical conditions, was secondarily exposed to an unknown amount of a Seresto Cat (Flumethrin-Imidacloprid) collar when her cat cuddled next to her face each day after she applied the collar to her cat earlier that same day.

On approximately 11-May-2020, the individual experienced erythema, a skin irritation, a rash and blisters, all on the face, around the mouth, at the exposure site.

On 14-May-2020, she was examined by a physician and was started on a regimen of an unspecified oral antibiotic and an unspecified steroid.

On 15-May-2020, the blisters around the mouth were resolved, but she experienced skin dryness and scabs, both on the face, around the mouth, at the exposure site. The clinical signs continued.

Version: 20-May-2020 at 18:20

Demographic information: Age: Adult Sex: Female	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	2 Days *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) The caller has seen PMD Exposure data: Amount of pesticide: Unknown per 1 Expose duration: 0 Days Patient weight: UNK Human severity category H-C	List signs/symptoms/adverse efford Application site erythe Application site reacts Application site inflam Application site bliste Application site skin of Application site lesion	ema ion NOS nmation er :hange	If lab tests were performed, list test names and results(If available submit report). None reported
	anatory or qualifying information su	crounding the incident. (add addition	al pages if necessary)

Internal ID#
2020-US0021455

 $\label{lem:condition} \mbox{Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information}$

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row I	Reporter Name		Submission	Contact pers	son (if differe	nt than reporter)	Internal ID#	
Administrative Data	1 *	date		Not Applicable			2020-US0022906	
	Address SOUND BEACH New York 11789 USA			Address USA				
	Phone #	63182136	59	Phone #				
	Incident Status: New	Location and dat	e of incident.	Date registra became awar		Was incident pa	rt of larger study ?	
	If update, include date of original submission	10-22-2019		incident. 05-21-2020		No		
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556-155		EPA Registration # (PA Registration # (Product 2)		EPA Registration # (Product 3)		
	A.L.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	. (5)		
	Product I name Seresto Cat	Product 2 name		Pro	Product 3 name			
	Exposed to concentrate pr	rior to dilution ?	Exposed to concentrate prior to dilution?			Exposed to concentrate prior to dilution?		
	Formulation Collar			Formulation			4.4	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Literative label directions incident site; (Existence label directions school, industrial surface water, combuilding/office, fo		I, nursery/greenhouse, includi mmercial turf, applica prest/woods, agricultural mainte		including m application maintenanc	Situation (act of using product):(examples nocluding mixing/loading, reentry, pplication, transportation, repair, naintenance of application equipment, nanufacturing/formulating).		
	Applicator certified PCO?		Home		See In	ncident Desc	ription Notes	
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	ees	l				

Version: 27-May-2020 at 16:50

Internal ID # 2020-US0022906
Brief description of incident circumstances

On approximately 21 Oct 2019, a 65 year old, woman, in unknown condition, with no known concomitant medical conditions, was secondarily exposed to an unknown amount of a Seresto Cat (Flumethrin-Imidacloprid) collar on the hands when she applied it to her cat and was exposed daily.

On approximately 22 Oct 2019, the individual experienced a rash and pruritus, both localized to small areas of the body, that would wax and wane.

On approximately 10 Feb 2020, she experienced a rash and pruritus, both localized to her arm. She was examined by a dermatologist and started on a regimen of an unspecified topical medication to be applied to the affected area.

On approximately 24 Feb 2020, the clinical signs resolved and the unspecified topical medication was discontinued.

On approximately 15 Mar 2020, she experienced a rash and pruritus, both localized to the back of her leg behind the knee. She was examined by her primary care physician and was started on an unspecified medication to be applied topically to the affected area.

On approximately 29 Mar 2020, the clinical signs resolved and the unspecified medication was discontinued.

On approximately 21 May 2020, she experienced a rash and pruritus, both localized to her left arm. She began applying the 2 unspecified medications topically to the affected area. The clinical signs continued unchanged.

Version: 27-May-2020 at 16:50

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Demographic information: Age: 65 Year(s) - *	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Scx: Female			
Occupation (if relevant)	Other	No	
	777	07.5 3.4 d	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
	If yes, days lost due to illness:	1 Days *	
No	in yes, may stose dae to miness.	1 vays	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) Patient has seen MD and	List signs/symptoms/adverse effect: Pruritus Dermatitis and eczema	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:	-		
Amount of pesticide:			
Unknown per 1			
onknown per 1			
Expose duration:			
0 Days			
Patient weight:			
UNK			
Human severity category			
H~C			
This box can be used to provide any expl-	I enatory or qualifying information sur	rrounding the incident, (add addition	onal pages if necessary)
		Г	
			Internal ID #
			2020-US0022906

- Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

Your driver will pickup your shipment(s) as usual.

Customers without a Daily Pickup

Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

UPS Access PointTM THE UPS STORE 13851 W 63RO ST SHAWNEE ,KS 66216 UPS Access PointTM HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 68216 UPS Access PointTM CVS STORE # 8580 8510 NIEMAN RD SHAWNEE ,KS 66203



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

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Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

UPS Access PointTM THE UPS STORE 13861 W 63RD ST SHAWNEE ,KS 66216 UPS Access PointTM HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 68216

UPS Access Point™ 6510 NIEMAN RD SHAWNEE ,KS 66203



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
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3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

Your driver will pickup your shipment(s) as usual.

Customers without a Daily Pickup

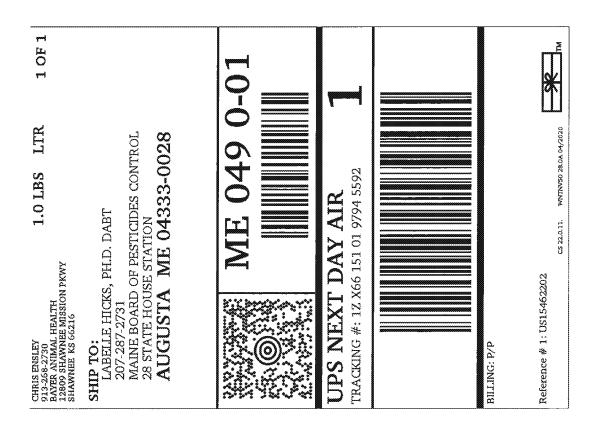
Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

THE UPS STORE 13851 W 63RD ST SHAWNEE ,KS 66216

UPS Access Point™ HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216

UPS Access Point™ CVS STORE # 8580 SHAWNEE KS 66203



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS

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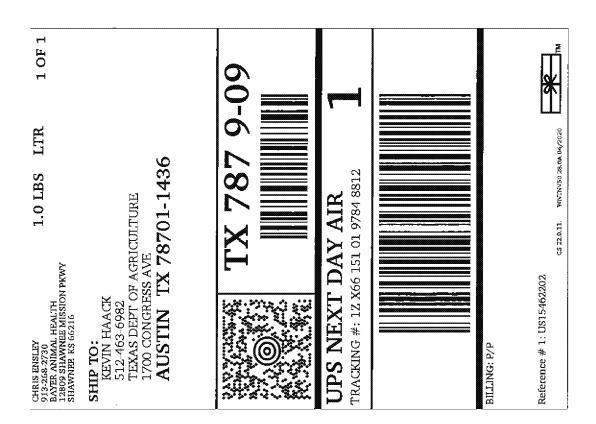
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UPS Access Point** CVS STORE # 8580 5510 NIEMAN RD SHAWNEE .KS 66203







July 24, 2020

U.S. Environmental Protection Agency

Document Processing Desk - 6(a)(2)

Office of Pesticide Programs - 7504P

Room S-4900, One Potomac Yard

Arlington, VA 22202-4501

SUBJECT: 6(a)(2) Incidents Accumulated for Month of June, 2020

Dear Sir/Madam:

Please find additional Bayer Animal Health Division 6(a)(2) incidents accumulated during the month of June, 2020. These incidents are being submitted in accordance with FIFRA Section 6(a)(2).

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: Bayer report nos:

2020-US0025990, 2020-US0031586





July 24, 2020

Adverse Effects Coordinator

Department of Pesticide Regulation

Pesticide Registration Branch

1001 | Street, PO Box 4015

Sacramento, CA 95812-4015

SUBJECT: 6(a)(2) Incidents Accumulated for Month of June, 2020

CCR Section 6210 Submission

Adverse Events Coordinator:

Enclosed please find Bayer's letters addressed to the U.S. EPA with the descriptions of Animal Health incidents attached and submitted to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated July 24, 2020 with attachments.





July 24, 2020
Labelle Hicks, Ph.D. DABT
Maine Board of Pesticides Control
28 Statehouse Station
Augusta, ME 04333

SUBJECT: 6(a)(2) Incidents Accumulated for Month of June, 2020.

Dear Dr. Hicks:

Enclosed please find Bayer's letters addressed to the U.S. EPA with the descriptions of Bayer Animal Health incidents attached and submitted pursuant

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated July 24; 2020 with attachments.





July 24, 2020

Paula McBath, Enviromental Chemist II

Pesticide Product Registration Section

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-7257

SUBJECT: 6(a)(2) Incidents for Month of June 2020 Section 326.14 (f) Reporting

Dear Paula McBath:

Enclosed please find Bayer's letters addressed to the U.S.

EPA with the descriptions of Animal Health incidents attached and submitted

pursuant to FIFRA 6(a)(2).

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730,

if I can provide any additional information, or to be any further assistance.

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

July m

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated July 24, 2020 with attachments.



Science For A Better Life



July 24, 2020

Mr. Kevin Haack

Texas Department of Agriculture

Pesticide Registration Program

Stephan F. Austin Building

1700 No. Congress Ave., Austin, TX 78701

SUBJECT: 6(a)(2) Incidents Accumulated for Month of June, 2020

Dear Mr. Haack:

Enclosed please find Bayer's letters addressed to the U.S. EPA with the descriptions of Animal Health incidents attached and submitted pursuant to FIFRA 6(a)(2).

Please feel free to contact me at chris.ensley@bayer.com or at 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated July 24, 2020 with attachments.

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

Page 1 of 3

Row 1	Reporter Name		Submission	Contact pers	son (if differe	nt than reporter)	Internal ID#
Administrative Data	Mr Chris Wallad	:e	date. 07-24-2020	1	Applicabl		2020-US0025990
	Address 110 NW 39th Ave Apt 145A GAINESVILLE Florida 32641, USA			Address USA			<u></u>
	Phone #	35287051	01	Phone #			
	Incident Status:	Incident Status: Location and dat		Date registra became awar incident.		Was incident pa	rt of larger study ?
	If update, include date of original submission 06-04-2020			06-04-	2020		No
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556-152		EPA Registration # (gistration # (Product 2)		EPA Registration # (Product 3)	
	A.L.(s) Imidacloprid-Pyriproxyfen		A.I. (s)		A.I	A.I. (s)	
	Product I name Advantage II Large Cat		Product 2 name		Рто	Product 3 name	
	Exposed to concentrate prior to dilution?		Exposed to concentrate prior to dilution?		ution? Exp	? Exposed to concentrate prior to dilution?	
	Formulation Topical so	lution	Formulation		For	Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Evidence label directions incident site: (Existence in the second in the second incident site: (Existence in the second in		al, nursery/greenhouse, incommercial turf, appropriet/woods, agricultural ma		Situation (act of using product):(examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).		ntry, epair,
	Applicator certified PCO?		Home		See Ir	nci de nt Desc	ription Notes
	No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	of incident circumstan	ces	L		

Version: 23-Jun-2020 at 09:51

Page 2 of 3

Internal ID # 2020-US0025990 Brief description of incident circumstances

On O4-Jun-2020, a 25 year old, 155 pound, man, in unknown condition, with no known concomitant medical conditions, was accidentally exposed to an unknown amount of Advantage II Large Cat (Imidacloprid-Pyriproxyfen) when it splashed into an unspecified eye.

Immediately post exposure, the individual experienced an eye irritation, eye pain and a blepharospasm, all in the unspecified eye. He rinsed his eye with water for an unspecified amount of time. He was examined by an emergency room physician, his eye was rinsed with saline and a slit lamp exam was performed.

On O5-Jun-2020, the eye pain was resolved, but he experienced eyelid edema and a skin irritation on the upper eyelid.

On approximately 06-Jun-2020, the eye pain recurred.

On approximately 07-Jun-2020, the eyelid edema resolved.

On approximately 11-Jun-2020, the eye pain resolved.

On approximately 18-Jun-2020, the eye irritation, blepharospasm and skin irritation resolved.

Version: 23-Jun-2020 at 09:51

1 10 / 100 all line vii, 10qua ve information, 1	1 1 0 don ou dura 11010 milo11/mi1011 /5 iz	inite the, designate as small in approp			
Demographic information: Age: 25 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify) ?		
Sex: Male					
Occupation (if relevant)	Other	No			
If female, pregnant ?	Was exposure occupational? Time between exposure and onset of symptoms:				
	If yes, days lost due to illness:	1 Minutes *			
Type of medical care sought (examples	List signs/symptoms/adverse effect	S	If lab tests were performed, list		
include none, clinic, hospital emergency department, private physician, PCC,	Eye irritation		test names and results(If available submit report).		
hospital inpatient)	Eye irritation Blepharospasm		None reported		
,	Blepharitis				
Exposure data:	Pruritus				
Amount of pesticide:					
Unknown per 1					
Expose duration:					
0 day(s)					
Patient weight:					
155 Pounds					
Human severity category					
H-C					
This box can be used to provide any explo	anatory or qualifying information sw	rrounding the incident. (add addition	nal pages if necessary)		
			1		
			iternal ID #		
			iivinai iD #		
		2	020-US0025990		

Page I of 3

Row 1	Reporter Name		Submission	Contact pers	son (if differe	nt than reporter)	Internal ID#
Administrative Data	Ms Elizabeth Sa	rneso	date. 07-24-2020	Not Applicable		2020-US0031586	
	Address 1237 School St INDIANA Pennsylvanja 15701 USA			Address USA			
	Phone # 7243889298			Phone #			
	Incident Status: New If update,include date of original submission	Location and dat	became aware of incident.		e of	Was incident part of larger study?	
	or garden union	04-15-2020		06-29-	.2020		
Row 2 Pesticide(s) Involved	EPA Registration # (Prod 11556-155	uct 1)	EPA Registration # (Product 2)	EP	A Registration # (Product 3)
	A.L.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	A.I. (s)	
	Product I name Seresto Dog (unspecified)		Product 2 name		Pro	Product 3 name	
	Exposed to concentrate prior to dilution?		Exposed to concentrate prior to dilution ?		ution? Ex	Exposed to concentrate prior to dilution?	
	Formulation Collar		Formulation		Fo	Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse No Incident site: (Examples include ho school, industrial, nursery/ greenh surface water, commercial turf, building/office, forest/woods, agricu (specify crop), right-of-way, (rail, thighway)).		l, nursery/greenhouse mmercial turf, prest/woods, agricultur	including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment,		ntry, epair,	
	Applicator certified PCO?	Home		See Incident Description Notes			ription Notes
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	ces				

Version: 9-Jul-2020 at 14:16

Page 2 of 3

Internal ID # 2020-US0031586
Brief description of incident circumstances

On O1-Apr-2020, a 48 year old, 160 pound, woman, in unknown condition, with no known concomitant medical conditions, self administered vitamin D since approximately 2020, was secondarily exposed to an unknown amount of a Seresto Small Dog (Flumethrin-Imidacloprid) collar on the hands when she applied the collar to her dog and the dog intermittently sat on her lap.

On approximately 15-Apr-2020, the individual experienced a swollen lip that would improve, then worsen with direct exposure to the dog daily. She began applying an unspecified topical emollient and an unspecified petroleum jelly topically to her lip daily.

On 22-Jun-2020, she removed the collar from her dog and applied 1 Seresto Large Dog (Flumethrin-Imidacloprid) collar to her dog. Approximately 1 hour post exposure, she experienced chapped skin around her mouth.

On 30-Jun-2020, she removed the collar from her dog and bathed the dog with dish soap.

On O3-Jul-2020, the clinical signs resolved and the individual recovered without medical intervention.

Version: 9-Jul-2020 at 14:16

r tovide an known, required information. I	Trequired data field information is di	ikinowii, designate as such in appro	priate area. 1 age 3 of 3
Demographic information: Age: 48 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted	Was protective clothing worn (specify)?
Sex: Female		suicide/homicide?	P
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	2 Weeks *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effects Allergic oedema Skin textural change	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:	-		
Amount of pesticide: Unknown per 1			
Expose duration:			
11 Week(s) 5 Day(s)			
Patient weight:			
160 Pounds			
Human severity category			
H-C			
This box can be used to provide any expl	lanatory or qualifying information su	rrounding the incident (add addition	ingl nages if necessary)
			Internal ID #
			2022 Ucocatro
			2020-US0031586

* approximate

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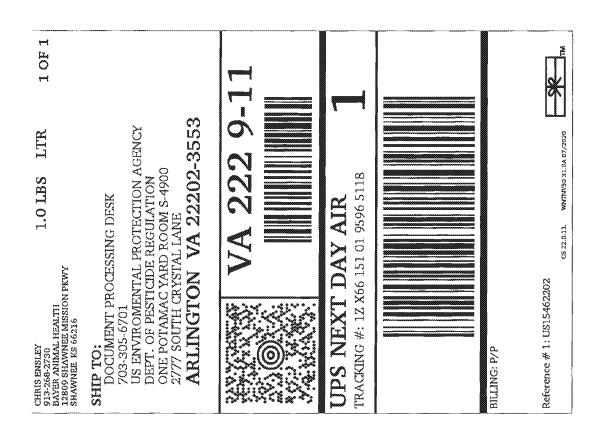
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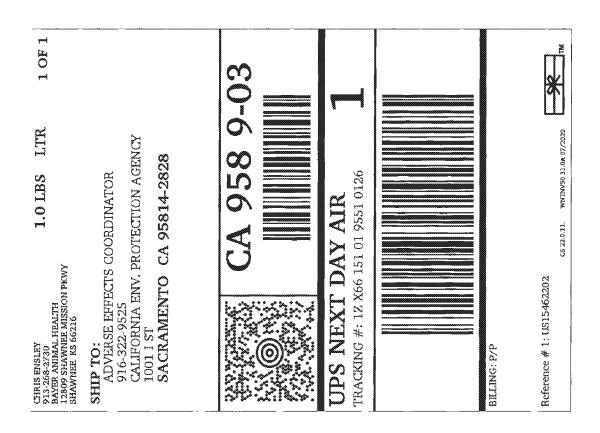
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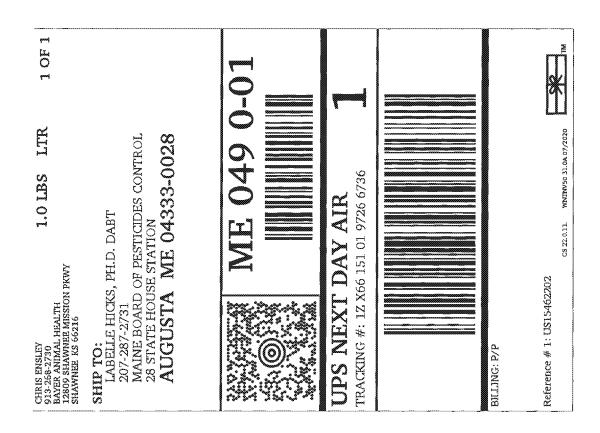
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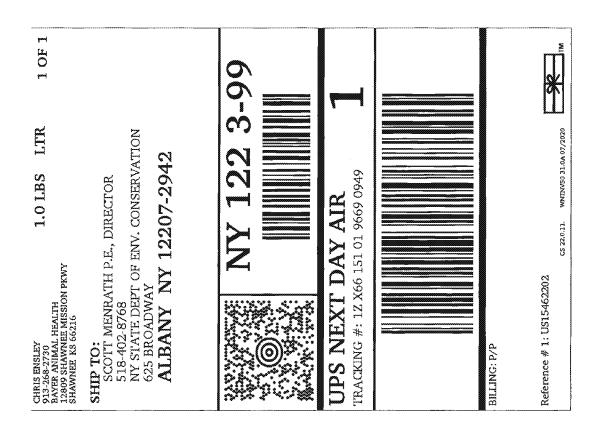
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11818 SHAWNEE MISSION PKWY
SHAWNEE ,KS 66203

UPS Access PointTM
THE UPS STORE
13851 W 63RD ST
SHAWNEE .KS 66216

UPS Access Point™ HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216



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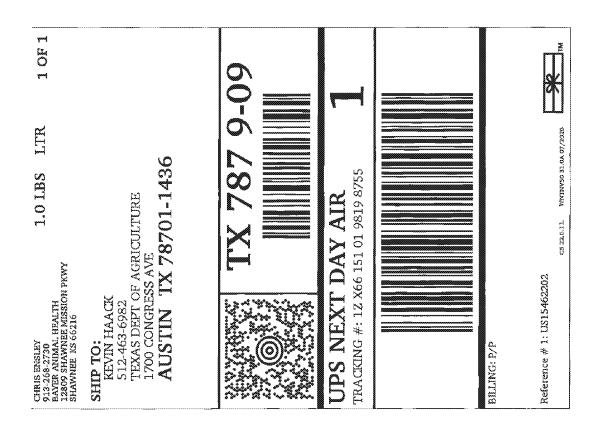
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Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

August 25, 2020

U.S. Environmental Protection Agency Document Processing Desk - 6(a)(2) Office of Pesticide Programs - 7504P Room S-4900, One Potomac Yard Arlington, VA 22202-4501

SUBJECT: 6(a)(2) Incidents Accumulated for Month of July, 2020 Dear Sir/Madam:

Please find additional Bayer Animal Health Division 6(a)(2) incidents accumulated during the month of July, 2020. These incidents are being submitted in accordance with FIFRA Section 6(a)(2).

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: Bayer report nos:

2020-US0035366





August 25, 2020

Adverse Effects Coordinator

Department of Pesticide Regulation

Pesticide Registration Branch

1001 I Street, PO Box 4015 Sacramento, CA 95812-4015

SUBJECT: 6(a)(2) Incidents Accumulated for Month of Julu, 2020

CCR Section 6210 Submission

Adverse Events Coordinator:

Enclosed please find Bayer's letters addressed to the U.S. EPA with the descriptions of Animal Health incidents attached and submitted to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated August 25, 2020 with attachments.





August 25, 2020
Labelle Hicks, Ph.D. DABT
Maine Board of Pesticides Control
28 Statehouse Station
Augusta, ME 04333

SUBJECT: 6(a)(2) Incidents Accumulated for Month of July, 2020.

Dear Dr. Hicks:

Enclosed please find Bayer's letters addressed to the U.S. EPA with the descriptions of Bayer Animal Health incidents attached and submitted pursuant

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated August 25, 2020 with attachments.





August 25, 2020

Paula McBath, Enviromental Chemist II

Pesticide Product Registration Section

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-7257

SUBJECT: 6(a)(2) Incidents for Month of July 2020 Section 326.14 (f) Reporting

Dear Paula McBath:

Enclosed please find Bayer's letters addressed to the U.S.

EPA with the descriptions of Animal Health incidents attached and submitted pursuant to FIFRA 6(a)(2).

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730,

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Respectfully,

BAYER

ANIMAL HEALTH DIVISION

plans in

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated August 25, 2020 with attachments.





August 25, 2020

Mr. Kevin Haack

Texas Department of Agriculture

Pesticide Registration Program

Stephan F. Austin Building

1700 No. Congress Ave., Austin, TX 78701

SUBJECT: 6(a)(2) Incidents Accumulated for Month of July, 2020

Dear Mr. Haack:

Enclosed please find Bayer's letters addressed to the U.S. EPA with the descriptions of Animal Health incidents attached and submitted pursuant to FIFRA 6(a)(2).

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Respectfully,

BAYER

ANIMAL HEALTH DIVISION

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated August 25, 2020 with attachments.

Bayer Animal Health

P.O. Box 390 Shawnee, Mission, KS 66201-0390 Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1	Reporter Name		Submission date.	-		nt than reporter)	Internal ID#
Administrative Data	Mr Mike Wills		date. 08-25-2020	Not	Applicabl	e	2020-US0035366
	Address 175 Malabu Drive Nbr 60 LEXINGTON Kentucky 40503 USA			Address USA Phone #			
	Phone #						
	Incident Status: New If update,include date of	Location and dat	e of incident.	Date registra became awai incident.		Was incident pa	rt of larger study ?
	original submission	06-25-2020	·	07-16-	-2020		No
Row 2 Pesticide(s) Involved	BPA Registration # (Prod 11556-155	iuct 1)	EPA Registration # (Product 2)	EP	A Registration # (Product 3)
	A.I.(s) Flumethrin-Imid	acloprid	A.I. (s)		A.I	. (s)	
	Product 1 name Seresto Cat		Product 2 name		Pro	duct 3 name	
	Exposed to concentrate p	rior to dilution ?	Exposed to concentra	ate prior to dil	lution ? Exp	oosed to concentr	ate prior to dilution ?
	Formulation Colla		Formulation			Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse No Applicator certified	Incident site: (Ex school, industrial surface water, con building/office, fo	I, nursery/greenhouse, includ applic prest/woods, agricultural manuf ght-of-way, (rail, utility, manuf		including m application, maintenanc manufacturi	ituation (act of using product):(examples neluding mixing/loading, reentry, pplication, transportation, repair, naintenance of application equipment, nanufacturing/formulating). See Incident Description Notes	
	PCO?						
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	of incident circumstan	ces			

Version: 21-Jul-2020 at 15:37

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 2 of 3

Internal ID # 2020-US0035366

Brief description of incident circumstances

On approximately 16-Jun-2020, a man, in unknown condition, with no known concomitant medical conditions, was secondarily exposed to an unknown amount of a Seresto Cat collar (Flumethrin-Imidacloprid) on the hands when he placed a collar on his 2 cats.

On approximately 25-Jun-2020, the individual experienced generalized skin lesion NOS and poor sleep.

On an unspecified date post onset, in approximately 2020, he was evaluated by a dermatologist and was started on a regimen of an unspecified medicated cream. The symptoms continued unchanged.

Version: 21-Jul-2020 at 15:37

Provide all known, required information.	ir required data field information is u	nknown, designate as such in app	ropriate area. Page 3 of 3
Demographic information: Age: Adult	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Male		A A A A A A A A A A A A A A A A A A A	
Occupation (if relevant)	Other	No	
If female, pregnant?	Was exposure occupational?	Time between exposure and onset of symptoms:	
	If yes, days lost due to illness:	9 Days *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect Skin lesion NOS Insomnia	s	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:			8
Amount of pesticide:			
Unknown per 1			
Expose duration:			
0 Days			
Patient weight:			
Unknown	•		
Human severity category			
H-C			
This box can be used to provide any expl	anatory or qualifying information su	rrounding the incident, (add addit	ional pages if necessary)
	-		
•			
•		_	
			Internal ID #

			2020-US0035366

- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

Your driver will pickup your shipment(s) as usual.

Customers without a Daily Pickup

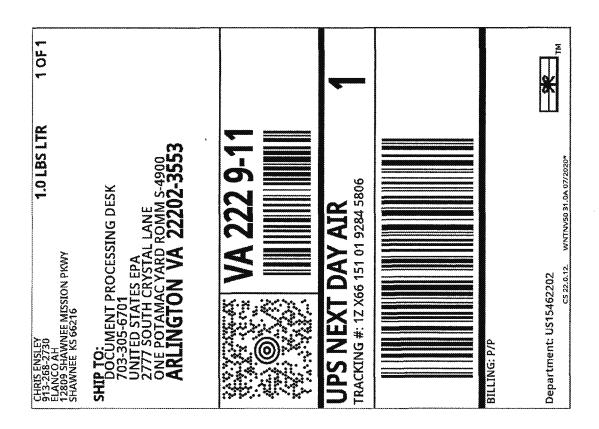
Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages, Hand the package to any UPS driver in your area.

UPS Access PointTM THE UPS STORE 13851 W 63RD ST SHAWNEE ,KS 66216

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11818 SHAWNEE MISSION PKWY
SHAWNEE ,KS 66203

UPS Access PointTM
HYPER COMPUTER AND BATTLE GAME
11941 JOHNSON DR
SHAWNEE ,KS 66218



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

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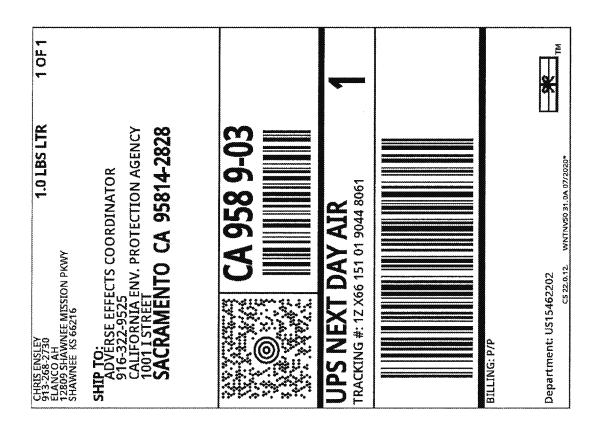
Customers without a Daily Pickup

Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

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SHAWNEE ,KS 66203

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SHAWNEE ,KS 66216



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
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Customers without a Daily Pickup

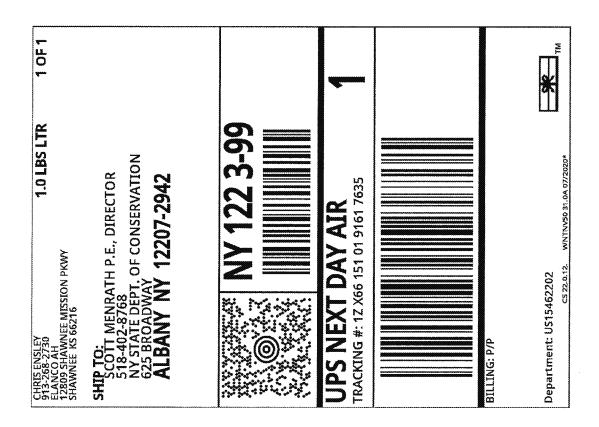
Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages, Hand the package to any UPS driver in your area.

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UPS Access PointTM
ADVANCE AUTO PARTS STORE #5998
11818 SHAWNEE MISSION PKWY
SHAWNEE ,KS 66203

UPS Access Point™ HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

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SHAWNEE ,KS 66203

UPS Access PointTM HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216



- Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

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UPS Access Point™ THE UPS STORE 13851 W 63RD ST SHAWNEE ,KS 66216 UPS Access Point™ ADVANCE AUTO PARTS STORE #5998 11818 SHAWNEE MISSION PKWY SHAWNEE ,KS 66203 UPS Access PointTM HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216

FOLD HERE



54 8/25/2020 September 30, 2020

U.S. Environmental Protection Agency

Document Processing Desk - 6(a)(2)

Office of Pesticide Programs - 7504P

Room S-4900, One Potomac Yard

Arlington, VA 22202-4501

SUBJECT: 6(a)(2) Incidents Accumulated for Month of August, 2020

Dear Sir/Madam:

Please find additional Elanco US Inc. 6(a)(2) incidents accumulated during the month of August, 2020. These incidents are being submitted in accordance with FIFRA Section 6(a)(2).

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: Elanco report nos:

2020-US0040829, 2020-US0044685, 2020-US0045006, 2020-US0045059

Elanco US Inc PO Box 390 Shawnee Mission, Kansas 66201-0390 September 30, 2020
Adverse Effects Coordinator
Department of Pesticide Regulation
Pesticide Registration Branch
1001 I Street, PO Box 4015
Sacramento, CA 95812-4015

SUBJECT: 6(a)(2) Incidents Accumulated for Month of August, 2020 CCR Section 6210 Submission

Adverse Events Coordinator:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Animal Health incidents attached and submitted to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Elanco Us Inc PO Box 390 Shawnee Mission, KS 66201-0390

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated September 30, 2020 with attachments.

September 30, 2020
Labelle Hicks, Ph.D. DABT
Maine Board of Pesticides Control
28 Statehouse Station
Augusta, ME 04333

SUBJECT: 6(a)(2) Incidents Accumulated for Month of August, 2020.

Dear Dr. Hicks:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc., incidents attached and submitted pursuant to

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated September 30, 2020 with attachments.

September 30, 2020

Paula McBath, Enviromental Chemist II

Pesticide Product Registration Section

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-7257

SUBJECT: 6(a)(2) Incidents for Month of August 2020 Section 326.14 (f) Reporting

Dear Paula McBath:

Enclosed please find Elanco's letters addressed to the U.S.

EPA with the descriptions of Animal Health incidents attached and submitted pursuant to FIFRA 6(a)(2).

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730,

if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Jus Endy

Encl: U.S. EPA letters dated September 30, 2020 with attachments.

September 30, 2020

Mr. Kevin Haack

Texas Department of Agriculture

Pesticide Registration Program

Stephan F. Austin Building

1700 No. Congress Ave., Austin, TX 78701

SUBJECT: 6(a)(2) Incidents Accumulated for Month of August, 2020

Dear Mr. Haack:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Animal Health incidents attached and submitted pursuant to FIFRA 6(a)(2).

Please feel free to contact me at chris.ensley@elancoah.com or at 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

July Endy

Encl: U.S. EPA letters dated September 30, 2020 with attachments.

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390 Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1 Administrative Data	Reporter Name Mr Thornton Who	eler	Submission date, 09-30-2020		son (if differe Applicabl	nt than reporter) e	Internal ID # 2020-US0040829
	Address PO box 871 Ringling ok 73456 USA			Address USA			
	Phone #	Phone #					
	Incident Status: New If update,include date of original submission 580-662-24 Location and dat		e of incident.	Date registrant became aware of incident.		Was incident part of larger study?	
Row 2 Pesticide(s) Involved	EPA Registration # (Proc	08-10-2020 luct 1)	EPA Registration # (Product 2)	EP.	 A Registration # (Product 3)
	A.I. (s) Beta-Cyfluthrin		A.I. (s)		A.I	A.I. (s)	
	Product 1 name Tempo SC Ultra Control Concent		Product 2 name		Pro	duct 3 name	
	Exposed to concentrate p	rior to dilution ?	Exposed to concentra	ate prior to dil	ution? Exp	oosed to concentra	ate prior to dilution?
	Formulation Solution		Formulation		For	Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Wes Weight in the property of the property		al, nursery/greenhouse, inclu immercial turf, appli orest/woods, agricultural main		including m application, maintenanc	ituation (act of using product) :(examples notuding mixing/loading, reentry, pplication, transportation, repair, paintenance of application equipment, nanufacturing/formulating).	
	Applicator certified PCO?		Home Sea		See Ir	cident Desc	ription Notes
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff).	Brief description	of incident circumstan	ces	<u>I.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
	See Incident Description						

Version: 1-Sep-2020 at 07:39

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 3 of 3

Demographic information: Age: 56 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Female Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	10 Minutes *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect Chest discomfort NOS Dyspnoea Thoracic irritation	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:			
Amount of pesticide:			
Unknown per 1			
Expose duration:			
0 day(s)			
Patient weight:			
110 Pounds			
Human severity category			
H-C			
		. [**	
			Internal ID#
			2020-US0040829

* approximate

Version: 1-Sep-2020 at 07:39

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row I	Reporter Name		Submission	Contact per	son (if differe	nt than reporter)	Internal ID#
Administrative Data	Ms Barbara Coo	per	date. 09-30-2020	Not	Applicabl	e	2020-US0044685
	Address 9130 E Park Ave TERRE HAUTE Indiana 47803 USA Phone # 812-877-1015			Address USA			
				Phone#			***************************************
	Incident Status: New If update,include date of	Incident Status: Location and dat New		Date registra became awar incident.	*		
	original submission	08-26-2020		08-27-	2020		No
Row 2 Pesticide(s) Involved	EPA Registration # (Prod	uct 1)	EPA Registration # (Product 2)	EP.	A Registration # (Product 3)
	A.L.(s) Cyfluthrin		A.I. (s)		A.I	(s)	
	Product 1 name Tempo 1% Dust Insecticide (unspecified)		Product 2 name		Pro	Product 3 name	
	Exposed to concentrate p	rior to dilution ?	Exposed to concentra	ite prior to dil	ution? Exp	osed to concentra	ate prior to dilution?
	Formulation Dusting powder		Formulation		For	Formulation	
Row 3 Incident Circumstances		Incident site: (Ex school, industrial surface water, con building/office, for	al, nursery/greenhouse, includi mmercial turf, applica orest/woods, agricultural mainte		including m application, maintenanc	ation (act of using product):(examples ading mixing/loading, reentry, ication, transportation, repair, ntenance of application equipment, ufacturing/formulating).	
	Applicator certified PCO?		Home	Home See		icident Desc	ription Notes
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	of incident circumstan	ces			

Version: 15-Sep-2020 at 09:07

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans Provide all known, required information. If required data field information is unknown, designate as such in appropriate area,

Page 3 of 3

Demographic information: Age: 62 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Female Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
No	If yes, days lost due to illness:	1 Minutes *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) oral steroids	List signs/symptoms/adverse effect Cough Bronchitis Bronchitis	s	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data: Amount of pesticide: Unknown per 1			
Expose duration: 0 day(s) Patient weight:			
194 Pounds			
Human severity category H-C			
This box can be used to provide any expl	anatory or qualifying information su	rrounding the incident (add addit	ional names if necessary)
			Internal ID#
			2020-US0044685

* approximate

Version: 15-Sep-2020 at 09:07

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Reporter Name		Submission	Contact per	son (if differ	ent than reporter)	Internal ID#	
Mr Burt Liebe	rman	date. 09-30-2020	Not	Applicab	le	2020-US0045006	
Address 3300 McPherson St. Waxhaw North Carolina 28173 USA			Address USA				
Phone #	Phone #		#*************************************				
Incident Status: New If update, include date of original submission		e of incident,	became awa	re of	Was incident pa	rt of larger study ?	
EPA Registration # (Product 1) 11556-152		EPA Registration # (Product 2) EPA Registration # (Pro		Product 3)		
A.I. (s) Imidacloprid-Pyriproxyfen		A.I. (s)		A.	A.I. (s)		
Product I name Advantage II La	rge Cat	Product 2 name		Pr	Product 3 name		
Exposed to concentrate p	rior to dilution ?	Exposed to concentra	ite prior to dil	lution? Ex	xposed to concentr	ate prior to dilution?	
Formulation Topical solution		Formulation		Fo	Formulation		
Evidence label directions were not followed? Yes Intentional misuse No	il, nursery/greenhouse, includ mmercial turf, applic prest/woods, agricultural maint		including n application maintenan	tuation (act of using product):(examples cluding mixing/loading, reentry, uplication, transportation, repair, aintenance of application equipment, anufacturing/formulating).			
Applicator certified PCO?		Home S		See I	ncident Desc	ription Notes	
			ces	1			
	Address 3300 McPherson St Waxhaw North Carolina 28173 USA Phone # Incident Status: New If update, include date of original submission EPA Registration # (Prod 11556-152 A.I. (s) Imidacloprid-Pyl Product I name Advantage II La Exposed to concentrate p Formulation Topical so Evidence label directions were not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff).	Address 3300 McPherson St. Waxhaw North Carolina 28173 USA Phone # 614-668-3 Incident Status: Location and dat New If update, include date of original submission EPA Registration # (Product 1) 11556-152 A.I. (s) Imidacloprid-Pyriproxyfen Product I name Advantage II Large Cat Exposed to concentrate prior to dilution? Formulation Topical solution Evidence label directions were not followed? Yes Intentional misuse No Incident site: (Exposed to concentrate prior to dilution? Formulation Topical solution Evidence label directions were not followed? Yes Intentional misuse No How exposed: (specify crop), rihighway)). Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, rumoff).	Address 3300 McPherson St. Waxhaw North Carolina 28173 USA Phone # 614-668-3042 Incident Status: New If update, include date of original submission 08-28-2020 EPA Registration # (Product 1) 11556-152 A.I. (s) Imidacloprid-Pyriproxyfen Product I name Advantage II Large Cat Exposed to concentrate prior to dilution? Formulation Topical solution Evidence label directions were not followed? Yes Intentional misuse No Incident site: (Examples include home, year of the state of the	Address 3300 McPherson St. Waxhaw North Carolina 28173 USA Phone # 614-668-3042 Incident Status:	Address 3300 McPherson St. Waxhaw North Carolina 28173 USA Phone # 614-668-3042 Incident Status: New If update, include date of original submission 08-28-2020 EPA Registration # (Product 1) 11556-152 A.I. (s) Imidacloprid-Pyriproxyfen Product I name Advantage II Large Cat Exposed to concentrate prior to dilution ? Formulation Topical solution Evidence label directions were not followed? Yes Intentional misuse No Incident site: (Examples include home, yard, surface water, commercial turf, building/office, forest/woods, agricultural (specify crop), right-of-way, (rail, utility, highway)). Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, rumoff). Brief description of incident circumstances	Address 3300 McPherson St. Waxhaw North Carolina 28173 USA Phone # 614-668-3042 Incident Status: New If update, include date of original submission 08-28-2020 EPA Registration # (Product 1) 11556-152 A.I. (s) Imidacloprid-Pyriproxyfen Product I name Advantage II Large Cat Exposed to concentrate prior to dilution? Formulation Topical solution Topical solution Evidence label directions with rested surface water, commercial furf, buildings office, forest-kwods, agricultural (specify crop), right-of-way, (rial, utility, highway)). Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, num0f). Brief description of incident circumstances	

Version: 8-Sep-2020 at 16:29

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 3 of 3

, A		7 0 11	
Demographic information: Age: 76 Year(s) - Sex: Male	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
	If yes, days lost due to illness:	1 Days *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) prescribed prednisone and Exposure data:	List signs/symptoms/adverse effect Urticaria Pruritus Erythema Skin oedema Hypersensitivity reacti		If lab tests were performed, list test names and results(If available submit report). None reported
Amount of pesticide: Unknown per 1			
Expose duration: 0 day(5) Patient weight:			
165 - LBS			
Human severity category			
H-C This box can be used to provide any expl			
			Internal ID #
			2020-US0045006

* approximate

Version: 8-Sep-2020 at 16:29

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1	Reporter Name		Submission	Contact per	son (if differe	nt than reporter)	Internal ID#
Administrative Data	Ms Terri Parma		date. 09-30-2020	-	Applicabl	-	2020-US0045059
	Address 1601 Lenox New Lyme Rd JEFFERSON Ohio 44047 USA			Address USA			
	Phone #	44081287	26	Phone #			
	Incident Status: Location and dat		e of incident.	Date registra became awar incident.		Was incident pa	ert of larger study?
	If update, include date of original submission	03-15-2020	merdent. 08-31-2020		-2020	No	
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556-155		EPA Registration # (Product 2)		EP	EPA Registration # (Product 3)	
	A.I. (s) Flumethrin-Imidacloprid		A.I. (s)		I.A	. (\$)	
	Product 1 name Seresto Large D	og	Product 2 name		Pro	educt 3 name	
	Exposed to concentrate p	ríor to dilution ?	Exposed to concentra	ite prior to dil	ution? Exp	posed to concentr	ate prior to dilution?
	Formulation Collar		Formulation		For	Formulation	
Row 3 Incident Circumstances	were not followed? school, industrial surface water, co building/office, for		al, nursery/greenhouse, i mmercial turf, a forest/woods, agricultural r		Situation (act of using product):(examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).		atry, epair,
	Applicator certified PCO?		Home		See Incident Description No		ription Notes
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	of incident circumstand	ces			

Version: 10-Sep-2020 at 12:31

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Demographic information:	Exposure route:	Was adverse effect result of	Was protective clothing worn
Age: 58 Year(s) -	-	suicide/homicide or attempted	(specify)?
0 = 1	•	suicide/homicide?	(opening):
Sex: Female	0.1	N-	
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and	
ii iemaie, pregnant !	, , , , , , , , , , , , , , , , , , , ,	onset of symptoms:	***
No	If yes, days lost due to illness:	2 Weeks *	
Type of medical care sought (examples	List signs/symptoms/adverse effect	J S	If lab tests were performed, list
include none, clinic, hospital emergency	Dermatitis and eczema		test names and results(If available
department, private physician, PCC,	Pruritus		submit report).
hospital inpatient)	Hypersensitivity reacti	on	None reported
abx, topical ointments,	Dermatitis and eczema Dermatitis and eczema		
Exposure data:	Dermatitis and eczema		
Amount of pesticide:			
Unknown per 1			
Expose duration:			
5 Month(s) 2 Week(s)			
Patient weight:			
165 Pounds			
Human severity category	·		***
H-C			
This box can be used to provide any expla	anatory or qualifying information su	arounding the incident. (add addition	nal pages if necessary)
•	, , ,	,	2,

Internal ID#

2020-US0045059

- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch, if you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

Your driver will pickup your shipment(s) as usual.

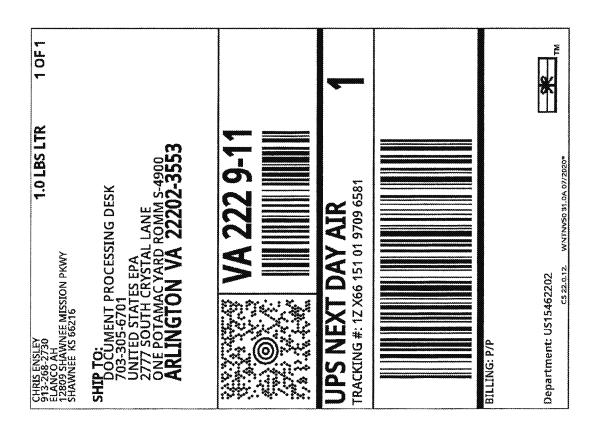
Customers without a Daily Pickup

Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

UPS Access Point**
THE UPS STORE 13851 W 83RD ST SHAWNEE ,KS 66216 UPS Access Point^{IM} ADVANCE AUTO PARTS STORE #5998 11818 SHAWNEE MISSION PKWY SHAWNEE ,KS 66203

UPS Access Point¹⁷⁶ HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE KS 66216



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label,
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch, if you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.
- 3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

Your driver will pickup your shipment(s) as usual.

Customers without a Daily Pickup

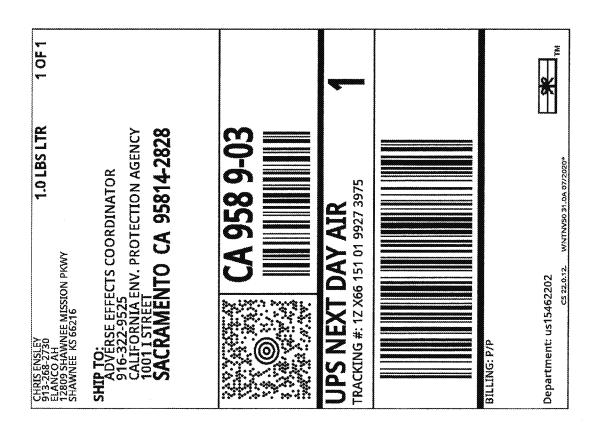
Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

UPS Access Point™ THE UPS STORE 13851 W 63RD ST SHAWNEE ,KS 66216

UPS Access PointTM ADVANCE AUTO PARTS STORE #5998 11818 SHAWNEE MISSION PKWY SHAWNEE ,KS 66203

UPS Access Point 14 HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 68216



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

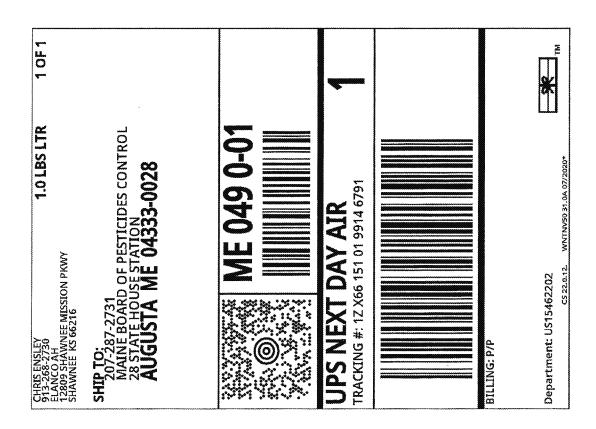
Your driver will pickup your shipment(s) as usual.

Customers without a Daily Pickup

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UPS Access PointTM THE UPS STORE 13851 W 63RD ST 6HAWNEE ,KS 66216 UPS Access Point™ ADVANCE AUTO PARTS STORE #5998 11818 SHAWNEE MISSION PKWY SHAWNEE ,KS 66203 UPS Access Point™ HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216



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11818 SHAWNEE MISSION PKWY
SHAWNEE .KS 86203

UPS Access PointTM
HYPER COMPUTER AND BATTLE GAME
11941 JOHNSON DR
SHAWNEE ,KS 66216



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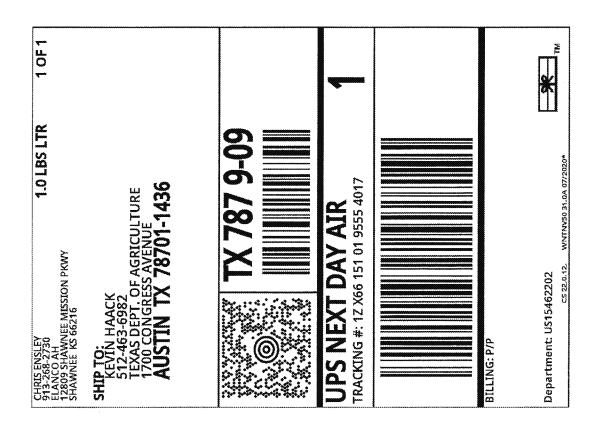
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October 19, 2020

U.S. Environmental Protection Agency

Document Processing Desk - 6(a)(2)

Office of Pesticide Programs - 7504P

Room S-4900, One Potomac Yard

Arlington, VA 22202-4501

SUBJECT: 6(a)(2) Incidents Accumulated for Month of September, 2020

Dear Sir/Madam:

Please find additional Elanco US Inc. 6(a)(2) incidents accumulated during the month of August, 2020. These incidents are being submitted in accordance with FIFRA Section 6(a)(2).

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: Elanco report nos:

2020-US0046320, 2020-US0047665, 2020-US0048623, 2020-US0050642

Elanco US Inc PO Box 390 Shawnee Mission, Kansas 66201-0390



October 19, 2020

Adverse Effects Coordinator

Department of Pesticide Regulation

Pesticide Registration Branch

1001 I Street, PO Box 4015

Sacramento, CA 95812-4015

SUBJECT: 6(a)(2) Incidents Accumulated for Month of September, 2020

CCR Section 6210 Submission

Adverse Events Coordinator:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Elanco Us Inc PO Box 390 Shawnee Mission, KS 66201-0390

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated October 19, 2020 with attachments.



October 19, 2020
Labelle Hicks, Ph.D. DABT
Maine Board of Pesticides Control
28 Statehouse Station
Augusta, ME 04333

SUBJECT: 6(a)(2) Incidents Accumulated for Month of September, 2020.

Dear Dr. Hicks:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc., incidents attached and submitted pursuant to

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Just inly

Encl: U.S. EPA letters dated October 19, 2020 with attachments.



October 19, 2020

Paula McBath, Enviromental Chemist II

Pesticide Product Registration Section

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-7257

SUBJECT: 6(a)(2) Incidents for Month of September 2020 Section 326.14 (f) Reporting

Dear Paula McBath:

Enclosed please find Elanco's letters addressed to the U.S.

EPA with the descriptions of Elanco US Inc. incidents attached and submitted pursuant to FIFRA 6(a)(2).

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

July Endy

Encl: U.S. EPA letters dated October 19, 2020 with attachments.



October 19, 2020

Mr. Kevin Haack

Texas Department of Agriculture

Pesticide Registration Program

Stephan F. Austin Building

1700 No. Congress Ave., Austin, TX 78701

SUBJECT: 6(a)(2) Incidents Accumulated for Month of September, 2020

Dear Mr. Haack:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted pursuant to FIFRA 6(a)(2).

Please feel free to contact me at chris.ensley@elancoah.com or at 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Chin Endy

Encl: U.S. EPA letters dated October 19, 2020 with attachments.

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390 Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1	Reporter Name		Submission	Contact per	son (if differe	nt than reporter)	Internal ID#	
Administrative Data	Ms Wanda Smith		date. 10-19-2020	Not	Applicabl	.e	2020-US0046320	
	Address 593 Lower Allen St Hudson Falls New York 12839 USA			Address				
	Phone #	518-832-33	140	Phone #				
	Incident Status: Location and date New If update,include date of		e of incident.	Date registrant became aware of incident.		Was incident part of larger study?		
	original submission			09-07-2020			No	
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556~155		EPA Registration # (Product 2)		EP	EPA Registration # (Product 3)		
	A.I.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	A.I. (s)		
	Product I name Seresto Dog (un	Product 2 name		Pro	Product 3 name			
	Exposed to concentrate p	rior to dilution ?	Exposed to concentr	ate prior to dil	ution? Ex	osed to concentr	ate prior to dilution?	
	Formulation Collar		Formulation			Formulation		
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Ves Japanting of the property of the prope		al, nursery/greenhouse, includi ommercial turf, applica forest/woods, agricultural mainte		including m application maintenance	Situation (act of using product):(examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).		
	Applicator certified PCO?			See Incident Description Notes				
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff).	Brief description	of incident circumstan	ces				
	See Incident Description							

Version: 9-Sep-2020 at 11:55

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 3 of 3

Demographic information: Age: 44 Year(s) - Sex: Female Occupation (if relevant) Other No Was adverse effect result of suicide/homicide or attempted suicide/homicide? No If female, pregnant? Unknown to Company Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) Exposure route: Was adverse effect result of suicide/homicide or attempted suicide/homicide? Time between exposure and onset of symptoms: 3 Days If lab tests were performed, list test names and results(If availal submit report). None reported	
Age: 44 Year(s) - Sex : Female Occupation (if relevant) Other No Was exposure occupational? Unknown to Company Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, Suicide/homicide or attempted suicide/homicide? No Time between exposure and onset of symptoms: 3 Days If lab tests were performed, list test names and results(If availal submit report).	
Sex: Female Occupation (if relevant) Other No If female, pregnant? Unknown to Company Was exposure occupational? If yes, days lost due to illness: Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC,	
Occupation (if relevant) Other No If female, pregnant? Was exposure occupational? Unknown to Company If yes, days lost due to illness: Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, Other No Time between exposure and onset of symptoms: 3 Days If lab tests were performed, list test names and results(If availai submit report).	
If female, pregnant? Was exposure occupational? Time between exposure and onset of symptoms: Unknown to Company If yes, days lost due to illness: 3 Days Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC,	
Unknown to Company If yes, days lost due to illness: Onset of symptoms: 3 Days Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC,	
Unknown to Company If yes, days lost due to illness: 3 Days Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, onset of symptoms: 3 Days If lab tests were performed, list test names and results(If availai submit report).	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, List signs/symptoms/adverse effects Urticaria List signs/symptoms/adverse effects Urticaria List signs/symptoms/adverse effects urticaria List signs/symptoms/adverse effects submit report).	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, List signs/symptoms/adverse effects Urticaria List signs/symptoms/adverse effects Urticaria List signs/symptoms/adverse effects test names and results(If availar submit report).	
include none, clinic, hospital emergency department, private physician, PCC, test names and results(If available submit report).	
department, private physician, PCC, submit report).	da.
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(nospital imparion) (noste i epot ted	
Exposure data:	
Amount of pesticide:	
Unknown per 1	
Expaga direction:	
Expose duration: 0 Days	
Patient weight:	
130 Pounds	
Human severity category	
H-C	
This box can be used to provide any explanatory or qualifying information surrounding the incident. (add additional pages if necessary)	
Total and The B	
Internal ID #	

Version: 9-Sep-2020 at 11:55

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row I	Reporter Name		Submission	Contact person (if different than re		_	Internal ID#
Administrative Data	Ms Sharon Hendi	ricksen	date. 10~19~2020	Dr No	ot provide	ed	2020-US0047665
	Address 33470 SW Chinook Plz SCAPPOOSE Oregon 97056 USA			Address Midway Veterinary Hospital LLC 34453 McGary Lane Warren Oregon 97053, USA			
	Phone #			Phone #		50339764	70
	Incident Status; New If update, include date of original submission 107~31~2020		Date registrant became aware of incident. 09-14-2020		re of	Was incident part of larger study?	
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556-155		EPA Registration # (ration # (Product 2)		EPA Registration # (Product 3)	
	A.I.(s) Flumethrin-Imid	A.I. (s)			. (s)		
	Product I name Seresto Small D	og	Product 2 name			Product 3 name	
	Exposed to concentrate p	Exposed to concentrate prior to dilution?			posed to concentr	ate prior to dilution?	
	Formulation Collar		Formulation			Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse	school, industrial surface water, con building/office, fo	, nursery/ greenhouse, including application mercial turf, application mainte the cof-way, (rail, utility, manufation).		including m application maintenanc manufactur	nct of using productiving/loading, reed, transportation, ree of application eding/formulating).	ntry, epair,
	Applicator certified PCO?) 266 T	incident peac	ription Notes
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident	Brief description	of incident circumstan	ces	,		
	Description						4.16 Son 2020 at 00

Version: 16-Sep-2020 at 09:07

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

• •	i required data tield in ormation is di	Third in, addigate to bear in appr	opilate alea, Fage 3 01 3
Demographic information: Age: Adult	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex:Female		Strette/normerde/	
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	3 Days *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect Pruritus	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:			
Amount of pesticide:			
Unknown per 1			
Expose duration:			
3 Days	To the same of the		
Patient weight:			
UNK	ng pelakan		
Human severity category	a particular and the second and the		
H-C			
This box can be used to provide any expl			
			Internal ID # 2020-US0047665

* approximate

Version: 16-Sep-2020 at 09:07

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1	Reporter Name		Submission	Contact per	son (if differer	nt than reporter)	Internal ID#	
Administrative Data	Ms Darlina Wrid	ik	date. 10-19-2020	Not	Applicabl	e	2020-US0048623	
	Address 464 N 88th Road Carmichael Pennsylvania 15320 USA			Address USA				
	Phone #	724-833-60)19	Phone #				
	Incident Status: Location and date New		e of incident.	Date registra became awar incident.		Was incident pa	rt of larger study ?	
	If update, include date of original submission	09-16-2020		09-17-	2020		No	
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556-155		EPA Registration # ((Product 2)	EP	A Registration # (Product 3)	
	A.I.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I.	(s)		
	Product I name Seresto Large D	og	Product 2 name		Pro	duct 3 name		
	Exposed to concentrate prior to dilution ?		Exposed to concentrate prior to dilution?		ution? Exp	? Exposed to concentrate prior to dilution.		
	Formulation Collar		Formulation			Formulation		
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse No	school, industrial surface water, con building/office, for	orest/woods, agricultural		Situation (act of using product): (examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).		ntry, epair,	
	Applicator certified PCO?	Home		See Incident Description		ription Notes		
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff).	xamples include direct ontact with treated rface, ingestion, spill,			L			

Version: 18-Sep-2020 at 16:34

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

1 10 vide all known, required miorination.	ir required data flora inferintation is a	aknown, designate as saen in app	ropriate area.
Demographic information: Age: 30 Year(s) -	Exposure route;	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify) ?
Sex: Female			
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
No	If yes, days lost due to illness:	10 Minutes *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC,	List signs/symptoms/adverse effect Urticaria Allergic oedema	S	If lab tests were performed, list test names and results(If available submit report).
hospital inpatient)			None reported
Exposure data:	1		
Amount of pesticide:			
Unknown per 1			
Expose duration:			
0 Days			
Patient weight:			
135 Pounds			
Human severity category	*		
H-C			
This box can be used to provide any expl	anatory or qualifying information su	rounding the incident (add addit	ional names if necessary)
, , ,	, , ,	,	, ,
			Internal ID#
			2020-US0048623
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* approximate

Version: 18-Sep-2020 at 16:34

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

***************************************	i, required information. If re	3					Page 1 of 3	
Row I Administrative Data	Reporter Name Terri Baines		Submission date. 10-19-2020		son (if differe Provided	nt than reporter)	Internal ID # 2020-US0050642	
	Address USA			Address USA				
	Phone #			Phone #				
	Incident Status: Location and dat New If update,include date of original submission		became awa incident.		became aware of incident.		part of larger study ?	
Row 2 Pesticide(s) Involved	09-06-2020 EPA Registration # (Product 1) 11556-155		EPA Registration # (EPA Registration # (Product 2)		EPA Registration # (Product 3)		
	A.I.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	A.I. (s)		
	Product 1 name Seresto (unspec	ified)	Product 2 name		Pro	Product 3 name		
	Exposed to concentrate prior to dilution?		Exposed to concentrate prior to dilution?		ution? Exp	oosed to concentr	ate prior to dilution?	
	Formulation Collar		Formulation		For	Formulation		
Row 3 Incident Circumstances	Evidence label directions Incident site: (Examples include hom were not followed? school, industrial, nurscry/ greenhou		l, nurscry/greenhouse nimercial turf, prest/woods, agricultur	including mixing/loading, reentry, application, transportation, repair, al maintenance of application equipment,		ntry, epair, quipment,		
	PCO?							
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	of incident circumstan	ces				

Version: 29-Sep-2020 at 19:45

	,		•
Demographic information: Age: 59 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted	Was protective clothing worn (specify)?
Sex: Female		suicide/homicide?	
Occupation (if relevant)	Unknown	No	
	0.11211		
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	Unknown *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect Dermatitis and eczema	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:			
Amount of pesticide:			
1 Collar per 1			
Expose duration:			
Unknown			
Patient weight:			
Unknown			
Human severity category	-		
H-C			
This box can be used to provide any expl			
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			nternal ID #
			2020~US0050642

* approximate

Version: 29-Sep-2020 at 19:45

- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS

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Customers without a Daily Pickup

Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

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SHAWNEE ,KS 66203

UPS Access Point™ HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 56216



- Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

Your driver will pickup your shipment(s) as usual.

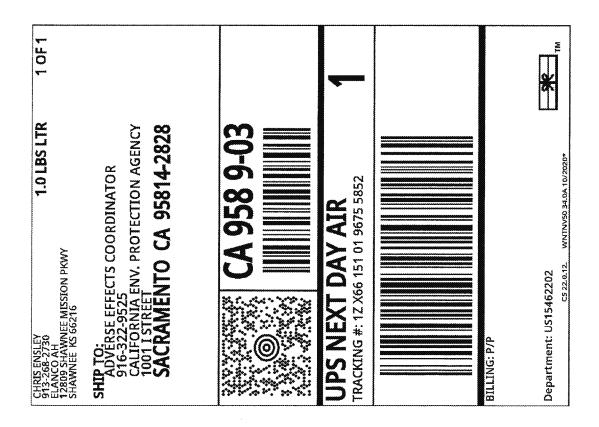
Customers without a Daily Pickup

Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

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UPS Access Point™ HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label,
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

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UPS Access PointTM THE UPS STORE 13851 W 63RD ST SHAWNEE ,KS 66218 UPS Access PointTM ADVANCE AUTO PARTS STORE #5998 11818 SHAWNEE MISSION PKWY SHAWNEE ,KS 68203 UPS Access Point™ HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE KS 66216



- Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

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Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

UPS Access PointTM THE UPS STORE 13851 W 63RD ST SHAWNEE ,KS 66216 UPS Access PointTM
ADVANCE AUTO PARTS STORE #5998
11818 SHAWNEE MISSION PKWY
SHAWNEE ,KS 66203

UPS Access Point^{TQ}
HYPER COMPUTER AND BATTLE GAME
11941 JOHNSON DR
SHAWNEE ,KS 66218



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

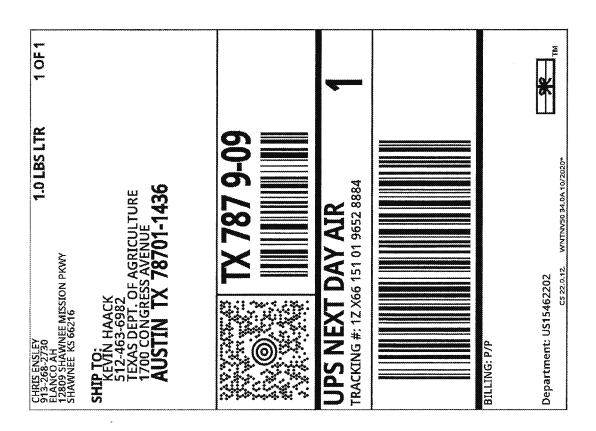
Your driver will pickup your shipment(s) as usual.

Customers without a Daily Pickup

Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

UPS Access PointTM THE UPS STORE 13851 W 63RD ST SHAWNEE ,KS 68216 UPS Access Polit™ ADVANCE AUTO PARTS STORE #5998 11818 SHAWNEE MISSION PKWY SHAWNEE ,KS 66203 UPS Access Point™
HYPER COMPUTER AND BATTLE GAME
11941 JOHNSON DR
SHAWNEE KS 66216





December 16, 2020

U.S. Environmental Protection Agency

Document Processing Desk - 6(a)(2)

Office of Pesticide Programs - 7504P

Room S-4900, One Potomac Yard

Arlington, VA 22202-4501

SUBJECT: 6(a)(2) Incidents Accumulated for Month of November, 2020

Dear Sir/Madam:

Elanco US Inc PO Box 390 Shawnee Mission, Kansas 66201-0390

Please find additional Elanco US Inc. 6(a)(2) incidents accumulated during the month of November, 2020. These incidents are being submitted in accordance with FIFRA Section 6(a)(2).

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: Elanco report nos:

July Endry

2020-US0057379, 2020-US0059025, 2020-US0059506, 2020-US0059731, 2020-US0059951



December 16, 2020

Adverse Effects Coordinator

Department of Pesticide Regulation

Pesticide Registration Branch

1001 I Street, PO Box 4015

Sacramento, CA 95812-4015

SUBJECT: 6(a)(2) Incidents Accumulated for Month of November, 2020

CCR Section 6210 Submission

Adverse Events Coordinator:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Elanco Us Inc PO Box 390 Shawnee Mission, KS 66201-0390

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated December 16, 2020 with attachments.



December 16, 2020
Labelle Hicks, Ph.D. DABT
Maine Board of Pesticides Control
28 Statehouse Station
Augusta, ME 04333

SUBJECT: 6(a)(2) Incidents Accumulated for Month of November, 2020.

Dear Dr. Hicks:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc., incidents attached and submitted pursuant to

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Rules wife

Encl: U.S. EPA letters dated December 16, 2020 with attachments.



December 16, 2020

Paula McBath, Enviromental Chemist II

Pesticide Product Registration Section

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-7257

SUBJECT: 6(a)(2) Incidents for Month of November 2020 Section 326.14 (f) Reporting

Dear Paula McBath:

Enclosed please find Elanco's letters addressed to the U.S.

EPA with the descriptions of Elanco US Inc. incidents attached and submitted pursuant to FIFRA 6(a)(2).

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730,

if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated December 16, 2020 with attachments.



December 16, 2020

Mr. Kevin Haack

Texas Department of Agriculture

Pesticide Registration Program

Stephan F. Austin Building

1700 No. Congress Ave., Austin, TX 78701

SUBJECT: 6(a)(2) Incidents Accumulated for Month of November, 2020

Dear Mr. Haack:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted pursuant to FIFRA 6(a)(2).

Please feel free to contact me at chris.ensley@elancoah.com or at 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

July in

Encl: U.S. EPA letters dated December 16, 2020 with attachments.

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390 Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1			Submission date.				Internal ID#
Administrative Data	Ms TJ Waters	Ms TJ Waters		Not	Applicabl	Le	2020-US0057379
	Address 8601 Sawyer Brown Road NASHVILLE Tennessee 37221 USA			Address USA			
	Phone #	615~394~5	848	Phone #			
	Incident Status: New If update,include date of original submission	Location and date of incident.		Date registrant became aware of incident.		Was incident pa	rt of larger study ?
Row 2 Pesticide(s) Involved	EPA Registration # (Prod	uct 1)	EPA Registration # (Product 2)	EP	A Registration # (Product 3)
	A.L.(s) Flumethrin-Imidacloprid		A.I. (s)		A.1	. (s)	
	Product I name Seresto Large Dog		Product 2 name		Pro	Product 3 name	
	Exposed to concentrate prior to dilution?		Exposed to concentrate prior to dilution?		ution? Ex	? Exposed to concentrate prior to dilution ?	
	Formulation Collar		Formulation		For	Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Surface water, co building/office, for the surface water is surface water.		al, nursery/greenhouse, incommercial turf, ap Forest/woods, agricultural ma		Situation (act of using product) :(examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).		ntry, epair,
	Applicator certified PCO?		Home		See I	ncident Desc	ription Notes
	No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	ces				

Version: 10-Nov-2020 at 16:06

Voluntary Industry Reporting Form: Provide all known, required information. I			ate area. Page 3 of 3
Demographic information: Age: 59 Year(s) - Sex: Female	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify) ?
Occupation (if relevant)	Other Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	11 Days	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) On 27-Oct-2020, patient	List signs/symptoms/adverse effect Pruritus Dermatitis and eczema Paraesthesia Urticaria	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data: Amount of pesticide: Unknown per 1			
Expose duration: 0 Days Patient weight: 185 Pounds	,		
Human severity category			
H~C			
This box can be used to provide any explanation	anatory or qualifying information su	arounding the incident. (add additional	pages if necessary)

Internal ID#

2020-US0057379

Version: 10-Nov-2020 at 16:06

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1			1 -			different than reporter) Internal		
Administrative Data	Mrs Sherry Beard		date. 12-16-2020	Not Applicab		e	2020-US0059025	
	Address LAVEEN Arizona 85339 USA	•	Address USA					
	Phone #	60142516	46	Phone#				
	Incident Status: New If update, include date of					Was incident pa	rt of larger study ?	
	original submission	10-12-2020		11-16-2020		No		
Row 2 Pesticide(s) Involved	EPA Registration # (Proc	uct 1)	EPA Registration #	(Product 2)	EP	A Registration # (Product 3)	
	A.I.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	(s)		
	Product I name Seresto Dog (unspecified)		Product 2 name		Pro	Product 3 name		
	Exposed to concentrate prior to dilution?		Exposed to concentrate prior to dilution?		ition? Exp	Exposed to concentrate prior to dilution?		
	Formulation Collar		Formulation			Formulation		
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Incident site: (Ex school, industria surface water, con building/office, for building/office, for building/office, for building/office, for building/office, for building		il, nursery/ greenhouse, includir numercial turf, applica prest/woods, agricultural mainte		including m application, maintenanc	uation (act of using product):(examples luding mixing/loading, reentry, plication, transportation, repair, intenance of application equipment, nufacturing/formulating).		
	Applicator certified PCO?		Home	Home See		ncident Desc	ription Notes	
	No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	ces					

Version: 19-Nov-2020 at 16:04

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 3 of 3

	1		
Demographic information: Age: Adult	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Female		Sucide/Honneide/	
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	1 Days *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect Pruritus	s .	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:	**		
Amount of pesticide:			
Unknown per 1			
Expose duration:			
0 Days			
Patient weight:			
UNK			
Human severity category			
H-C		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	
This box can be used to provide any expla	anatory or qualifying information su	rrounding the incident. (add addit	ional pages if necessary)
			Internal ID#
			2020-US0059025
	14		2020-030033023

* approximate

Version: 19-Nov-2020 at 16:04

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row I	Reporter Name		Submission	Contact per	son (if differe	nt than reporter)	Internal ID#
Administrative Data	Mr Bill Dant		date. 12-16-2020	Not	Applicabl	e	2020-US005950(
	Address 3701 SW Comus St PORTLAND Oregon 97219 USA		Address				
	Phone # 5037812999			Phone #			
	Incident Status:	New		Date registran became aware incident.		Was incident part of larger study?	
	If update, include date of original submission	11-18-2020			11-19-2020 No		No
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556-152		EPA Registration # ((Product 2)		EPA Registration # (Product 3)	
	A.I.(s) Imidacloprid-Pyriproxyfen		A.I.(s) Imidacloprid-Pyriproxyfen			A.I. (s)	
	Product I name Advantage II Large Cat		Product 2 name Advantage II Medium Dog		***	Product 3 name	
	Exposed to concentrate p	Exposed to concentrate prior to dilution?		ution? Exp	Exposed to concentrate prior to dilution		
	Formulation Topical solution		Formulation Topical solution		For	Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse No	re not followed? Yes ntentional misuse school, industria surface water, coi building/office, fo (specify crop), ri		l, nursery/ greenhouse, inclummercial turf, appl prest/woods, agricultural main		Situation (act of using product):(examples netuding mixing/loading, reentry, spplication, transportation, repair, naintenance of application equipment, nanufacturing/formulating).	
	Applicator certified PCO?	Home		See Incident Description Not		ription Notes	
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff).	Brief description	ces				
	See Incident Description						

Version: 20-Nov-2020 at 14:53

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 3 of 3

Demographic information: Age: 58 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Male Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
	If yes, days lost due to illness:	1 Days	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) permethrin cream Exposure data:	List signs/symptoms/adverse effect Dermatitis and eczema Erythema Dermatitis and eczema Skin lesion NOS	S	If lab tests were performed, list test names and results(If available submit report). None reported
Amount of pesticide: Unknown per 1			
Expose duration: 0 day(s) Patient weight: 200 Pounds			
Human severity category			
H-C			
			Internal tD #
			2020-US0059506

Version: 20-Nov-2020 at 14:53

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1	Reporter Name		Submission	Contact pers	on (if differe	nt than reporter)	Internal ID#
Administrative Data	Ms Theresa Mil	Ler	date. 12~16~2020	Not Applicable		2020-US0059731	
	Address 141 C141 Commodor Dr NWommodor Dr NW Mitchell Georgia 31061 USA			Address USA			
	Phone # 478-451-9998			Phone #			
	Incident Status: New If update, include date of	Location and date	te of incident. Date registrant became aware of incident.			Was incident part of larger study?	
	original submission	09-01-2020		11-18-2020 No		No	
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556-155		EPA Registration # (istration # (Product 2)		EPA Registration # (Product 3)	
	A.I.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	A.I. (s)	
	Product I name Seresto (unspec	ified)	Product 2 name		Pro	Product 3 name	
	Exposed to concentrate p	rior to dilution ?	Exposed to concentrate prior to dilution?			Exposed to concentrate prior to dilution ?	
	Formulation Collar		Formulation			Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse No	school, industrial surface water, cor building/office, fo	nurscry/ greenhouse, includi nmercial turf, applica rest/woods, agricultural mainte		including m application, maintenanc	ion (act of using product):(examples fing mixing/loading, reentry, cation, transportation, repair, enance of application equipment, facturing/formulating).	
	Applicator certified PCO?		See Incident Description Notes				
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff).	ramples include direct intact with treated face, ingestion, spill, ft, runoff).					
	See Incident Description						

Version: 3-Dec-2020 at 10:57

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 3 of 3

			1
Demographic information: Age: 62 Year (5) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify) ?
Sex: Female		Salvido no interido .	
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms;	
No	If yes, days lost due to illness:	4 Hours *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect Dizziness Nausea Malaise Emesis Ataxia	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:	Ataxia		
Amount of pesticide:	Ear pain		
Unknown per 1	Dyspepsia		
Expose duration:			
0 Days			
Patient weight:			
UNK			
Human severity category			
H-C			
This box can be used to provide any expl	anatory or qualifying information su	rrounding the incident, (add additio	nal pages if necessary)
		I	nternal ID #
		2	020-US0059731
·	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~		

* approximate

Version: 3-Dec-2020 at 10:57

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Reporter Name	Submission	Contact person (if different than reporter		nt than reporter)	Internal ID #	
Ms Patricia Bo	olden	date. 12~16~2020	Not Provided		2020-US0059951	
1			Address			
Phone # 9316705763			Phone #			
Incident Status:			became aware of		Was incident part of larger study?	
If update, include date of original submission	09-01-2019	7010		-2020	No	
EPA Registration # (Product 1) 11556-155		EPA Registration # (Product 2)		EPA Registration # (Product 3)	
A.I.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	A.l. (s)	
Product I name Seresto Dog (unspecified)		Product 2 name		Pro	Product 3 name	
Exposed to concentrate prior to dilution?		Exposed to concentrate prior to dilution?		ution? Ex	Exposed to concentrate prior to dilution?	
Formulation Collar		Formulation		For	Formulation	
were not followed? school, industrial, nursery/greend surface water, commercial turf, building/office, forest/woods, agric			including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment,			ntry, epair,
Applicator certified PCO?		See Incident Description Notes				
How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident			ces	3		
	Address 11575 Fisher Rd BON AQUA Tennessee 37025 USA Phone # Incident Status: New If update,include date of original submission EPA Registration # (Prod 11556-155 A.I. (s) Flumethrin-Imid: Product I name Seresto Dog (un) Exposed to concentrate p Formulation Colla Evidence label directions were not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill,	Address 11575 Fisher Rd BON AQUA Tennessee 37025 USA Phone # 931670576 Incident Status: New If update, include date of original submission EPA Registration # (Product 1) 11556-155 A.I. (s) Flumethrin-Imidacloprid Product I name Seresto Dog (unspecified) Exposed to concentrate prior to dilution? Formulation Collar Evidence label directions were not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, Brief description	Address 11575 Fisher Rd BON AQUA Tennessee 37025 USA Phone # 9316705763 Incident Status: Location and date of incident. New If update, include date of original submission Depth Registration # (Product 1) 11556-155 A.I. (s) Flumethrin-Imidacloprid Product 1 name Seresto Dog (unspecified) Exposed to concentrate prior to dilution? Exposed to concentrate prior to dilution? Evidence label directions were not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: Cexamples include home, surface water, commercial turf, building/office, forest/woods, agricultur (specify crop), right-of-way, (rail, utilithighway)). Home Brief description of incident circumstan surface, ingestion, spill, Brief description of incident circumstan	Address 11575 Fisher Rd BON AQUA Tennessee 37025 USA Phone # 9316705763 Incident Status:	Address 11575 Fisher Rd BON AQUA Tennessee 37025 USA Phone # 9316705763 Incident Status: New If update, include date of original submission 09-01-2019 EPA Registration # (Product 1) 11556-155 A.I. (s) Flumethrin-Imidacloprid Product I name Seresto Dog (unspecified) Exposed to concentrate prior to dilution? Exposed to concentrate prior to dilution? Exposed to concentrate prior to dilution? Evidence label directions were not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, line in the product of incident circumstances No How exposed: (examples include direct contact with treated surface, ingestion, spill, line in the product of incident circumstances Brief description of incident circumstances	Address 11575 Fisher Rd BON AQUA Tennessee 37025 USA Phone # 9316705763 Incident Status: New If update, include date of original submission 09-01-2019 EPA Registration # (Product 1) 11556-155 A.I. (s) Flumethrin-Imidacloprid Product I name Seresto Dog (unspecified) Exposed to concentrate prior to dilution? Exposed

Version: 2-Dec-2020 at 07:07

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information. I	f required data field information is w	nknown, designate as such in app	ropriate area. Page 3 of 3
Demographic information: Age: Adult	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Male Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational? No If yes, days lost due to illness:	Time between exposure and onset of symptoms: 2 Hours *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) medical induced coma, Exposure data:	List signs/symptoms/adverse effect Systemic disorder NOS Convulsion Anaphylaxis	S	If lab tests were performed, list test names and results(If available submit report). None reported
Amount of pesticide: Unknown per 1			
Expose duration: 0 Days Patient weight: UNK			
Human severity category			
H-B			
			Internal ID #
			2020-US0059951

Version: 2-Dec-2020 at 07:07

- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.

3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

Your driver will pickup your shipment(s) as usual.

Customers without a Daily Pickup

Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

UPS Access Point^{FM}
THE UPS STORE
13851 W 63RD ST
SHAWNEE ,KS 66216

UPS Access Point^{IN} ADVANCE AUTO PARTS STORE #5998 11818 SHAWNEE MISSION PKWY SHAWNEE JKS 66203 UPS Access PointTM HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
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3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

Your driver will pickup your shipment(s) as usual.

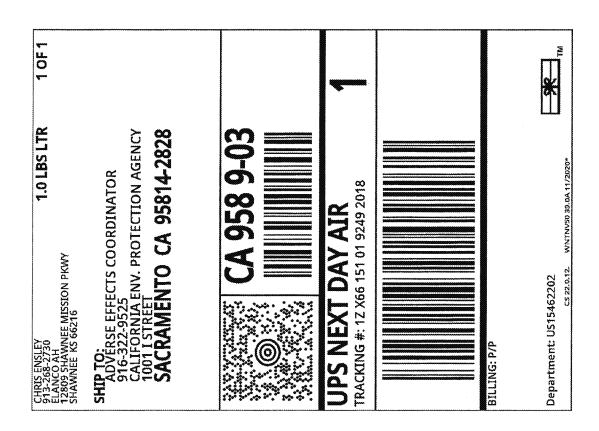
Customers without a Daily Pickup

Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

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UPS Access Point™
HYPER COMPUTER AND BATTLE GAME
11941 JOHNSON DR
SHAWNEE ,KS 56216



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HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 56216



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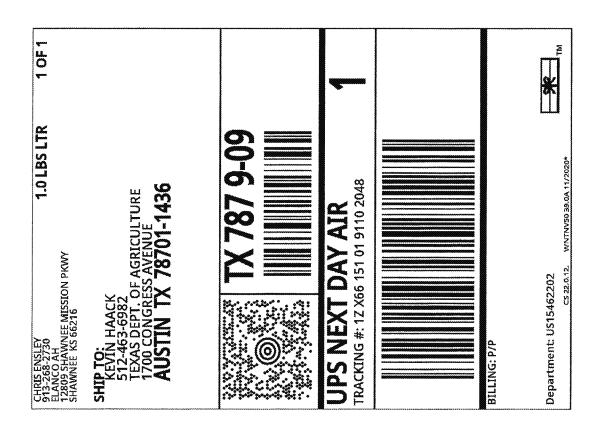
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SHAWNEE ,KS 65203

UPS Access Point^{FM} HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216





November 19, 2020

U.S. Environmental Protection Agency

Document Processing Desk - 6(a)(2)

Office of Pesticide Programs - 7504P

Room S-4900, One Potomac Yard

Arlington, VA 22202-4501

SUBJECT: 6(a)(2) Incidents Accumulated for Month of October, 2020

Dear Sir/Madam:

Please find additional Elanco US Inc. 6(a)(2) incidents accumulated during the month of August, 2020. These incidents are being submitted in accordance with FIFRA Section 6(a)(2).

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Chin Energy

Encl: Elanco report nos:

No cases to report for this time period.

Elanco US Inc PO Box 390 Shawnee Mission, Kansas 66201-0390



November 19, 2020

Adverse Effects Coordinator

Department of Pesticide Regulation

Pesticide Registration Branch

1001 I Street, PO Box 4015

Sacramento, CA 95812-4015

SUBJECT: 6(a)(2) Incidents Accumulated for Month of October, 2020

CCR Section 6210 Submission

Adverse Events Coordinator:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Elanco Us Inc PO Box 390 Shawnee Mission, KS 66201-0390

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

July Enly

Encl: U.S. EPA letters dated November 19, 2020.



November 19, 2020
Labelle Hicks, Ph.D. DABT
Maine Board of Pesticides Control
28 Statehouse Station
Augusta, ME 04333

SUBJECT: 6(a)(2) Incidents Accumulated for Month of October, 2020.

Dear Dr. Hicks:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc., incidents attached and submitted pursuant to

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

- July will

Encl: U.S. EPA letters dated November 19, 2020.



November 19, 2020

Paula McBath, Enviromental Chemist II

Pesticide Product Registration Section

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-7257

SUBJECT: 6(a)(2) Incidents for Month of October 2020 Section 326.14 (f) Reporting

Dear Paula McBath:

Enclosed please find Elanco's letters addressed to the U.S.

EPA with the descriptions of Elanco US Inc. incidents attached and submitted pursuant to FIFRA 6(a)(2).

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated November 19, 2020.



November 19, 2020

Mr. Kevin Haack

Texas Department of Agriculture

Pesticide Registration Program

Stephan F. Austin Building

1700 No. Congress Ave., Austin, TX 78701

SUBJECT: 6(a)(2) Incidents Accumulated for Month of October, 2020

Dear Mr. Haack:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted pursuant to FIFRA 6(a)(2).

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Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated November 19, 2020.

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

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3. GETTING YOUR SHIPMENT TO UPS

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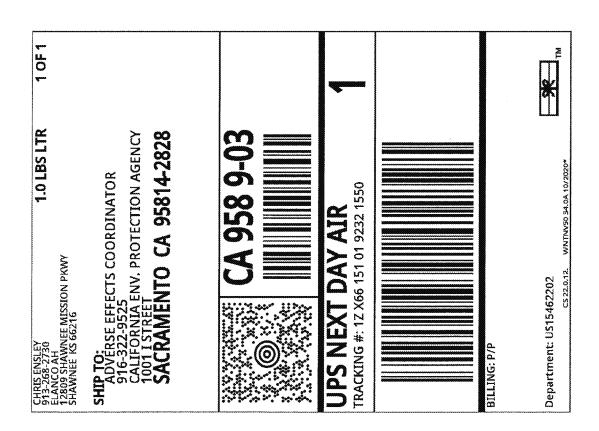
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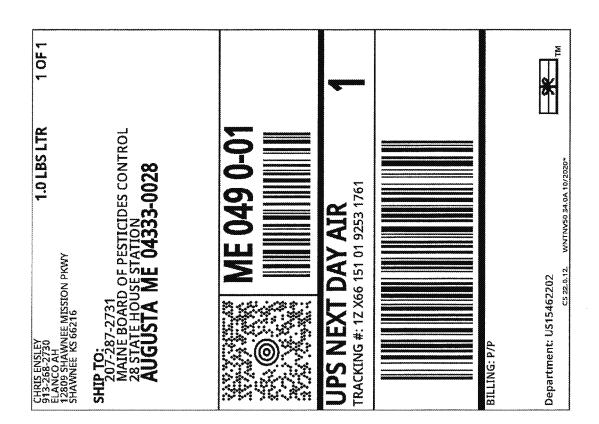
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December 16, 2020

U.S. Environmental Protection Agency

Document Processing Desk - 6(a)(2)

Office of Pesticide Programs - 7504P

Room S-4900, One Potomac Yard

Arlington, VA 22202-4501

SUBJECT: 6(a)(2) Incidents Accumulated for Month of November, 2020

Dear Sir/Madam:

Elanco US Inc PO Box 390 Shawnee Mission, Kansas 66201-0390

Please find additional Elanco US Inc. 6(a)(2) incidents accumulated during the month of November, 2020. These incidents are being submitted in accordance with FIFRA Section 6(a)(2).

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: Elanco report nos:

July Endry

2020-US0057379, 2020-US0059025, 2020-US0059506, 2020-US0059731, 2020-US0059951



December 16, 2020

Adverse Effects Coordinator

Department of Pesticide Regulation

Pesticide Registration Branch

1001 I Street, PO Box 4015

Sacramento, CA 95812-4015

SUBJECT: 6(a)(2) Incidents Accumulated for Month of November, 2020

CCR Section 6210 Submission

Adverse Events Coordinator:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Elanco Us Inc PO Box 390 Shawnee Mission, KS 66201-0390

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated December 16, 2020 with attachments.



December 16, 2020
Labelle Hicks, Ph.D. DABT
Maine Board of Pesticides Control
28 Statehouse Station
Augusta, ME 04333

SUBJECT: 6(a)(2) Incidents Accumulated for Month of November, 2020.

Dear Dr. Hicks:

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Chris Ensley

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Rulins rule

Encl: U.S. EPA letters dated December 16, 2020 with attachments.



December 16, 2020

Paula McBath, Enviromental Chemist II

Pesticide Product Registration Section

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-7257

SUBJECT: 6(a)(2) Incidents for Month of November 2020 Section 326.14 (f) Reporting

Dear Paula McBath:

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December 16, 2020

Mr. Kevin Haack

Texas Department of Agriculture

Pesticide Registration Program

Stephan F. Austin Building

1700 No. Congress Ave., Austin, TX 78701

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Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

July in

Encl: U.S. EPA letters dated December 16, 2020 with attachments.

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390 Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1	Reporter Name		Submission Contact person (if different than repor		nt than reporter)	Internal ID#	
Administrative Data	Ms TJ Waters		date. 12-16-2020,	Not Applicable		. e	2020-US0057379
	Address 8601 Sawyer Brown NASHVILLE Tennessee 37221 USA	n Road		Address USA			
	Phone #	Phone #					
	Incident Status: New If update,include date of original submission	Location and dat	e of incident.	Date registra became awar incident.	e of	Was incident part of larger study ?	
Row 2 Pesticide(s) Involved	EPA Registration # (Prod	<u> </u>	EPA Registration # (Product 2)	EP	 A Registration # (Product 3)
	A.L.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	A.I. (s)	
	Product I name Seresto Large D	og	Product 2 name		Pro	Product 3 name	
	Exposed to concentrate p	rior to dilution ?	Exposed to concentr	ate prior to dil	ution? Ex	posed to concentr	ate prior to dilution ?
	Formulation Colla	r	Formulation			Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse No	Incident site: (Ex school, industria surface water, co building/office, fo	al, nursery/greenhouse, included includ		including m application maintenanc	uation (act of using product):(examples luding mixing/loading_reentry, plication, transportation, repair, intenance of application equipment, nufacturing/formulating).	
	Applicator certified PCO?		Home Se		See Ii	ncident Desc	ription Notes
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident	of incident circumstan	ces				
	Description						

Version: 10-Nov-2020 at 16:06

Voluntary Industry Reporting Form:	. , . ,		
Previde all known, required information. I	f required data field information is u	nknown, designate as such in appropris	ate area. Page 3 of 3
Demographic information: Age: 59 Year(s) - Sex: Female Occupation (if relevant)	Exposure route: Other	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify) ?
•			
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	11 Days	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) On 27-Oct-2020, patient	List signs/symptoms/adverse effect Pruritus Dermatitis and eczema Paraesthesia Urticaria	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data: Amount of pesticide: Unknown per 1			
Expose duration: O Days Patient weight:			
185 Pounds			
Human severity category			
H-C			
This box can be used to provide any expl	anatory or qualifying information su	rrounding the incident, (add additional	pages if necessary)
•			

Internal ID#

2020-US0057379

Version: 10-Nov-2020 at 16:06

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1	Reporter Name		Submission date.	Contact person (if different than reporter		• •	Internal ID#
Administrative Data	Mrs Sherry Bear	^d	12-16-2020	Not	Applicabl	e	2020-US005902
	Address LAVEEN Arizona 85339 USA		Address				
	Phone #	601425164	¥6	Phone#			
	Incident Status: Location and date New If update, include date of		e of incident. Date regis		became aware of		rt of larger study ?
	original submission	10-12-2020		11-16-	-2020		No
Row 2 Pesticide(s) Involved	EPA Registration # (Proc	fuct 1)	EPA Registration # (Product 2)	EP	A Registration # (Product 3)
	A.I.(s) Flumethrin-Imidacloprid		A.I. (s)		A.I	A.I. (s)	
	Product I name Seresto Dog (un	specified)	Product 2 name		Pro	Product 3 name	
	Exposed to concentrate p	rior to dilution ?	Exposed to concentr	ate prior to dil	ution? Exp	oosed to concentr	ate prior to dilution
	Formulation Collar		Formulation			Formulation	
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse No	il, nursery/ greenhouse, includi mmercial turf, applica orest/woods, agricultural mainte		including m application, maintenanc	nation (act of using product) :(examples uding mixing/loading, reentry, lication, transportation, repair, ntenance of application equipment, nufacturing/formulating).		
	Applicator certified PCO?		Home		See Ir	icident Desc	ription Notes
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff).	Brief description	of incident circumstan	ces	I		
	See Incident Description						

Version: 19-Nov-2020 at 16:04

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 3 of 3

	1	, , , , , , , , , , , , , , , , , , , ,	
Demographic information: Age: Adult	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Female		Sucide/Honneide/	
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	1 Days *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect Pruritus	s .	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:	**		
Amount of pesticide:			
Unknown per 1			
Expose duration:			
0 Days			
Patient weight:			
UNK			
Human severity category			
H-C			
This box can be used to provide any expl	anatory or quantying information su	rrounding the incident, (add addit	ionai pages ii necessary)
			Internal ID #
			2020-US0059025

* approximate

Version: 19-Nov-2020 at 16:04

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Reporter Name		, ,		son (if differe	nt than reporter)	Internal ID#
Mr Bill Dant		date. 12-16-2020	Not	Applicabl	e .	2020-US0059506
Address 3701 SW Comus St PORTLAND Oregon 97219 USA		Address USA				
Phone #	Phone #					
Incident Status: New	Location and dat	e of incident.	became awai		Was incident pa	rt of larger study?
If update, include date of original submission	11-18-2020		11-19-2020		No	
EPA Registration # (Product 1) 11556-152		EPA Registration # (EPA Registration # (Product 3)	
A.I. (s) Imidacloprid-Pyriproxyfen		A.I.(s) Imidacloprid-Pyriproxyfen		1	A.I. (s)	
Product I name Advantage II La	rge Cat	Product 2 name Advantage II Medium Dog			Product 3 name	
Exposed to concentrate p	rior to dilution ?	Exposed to concentrate prior to dilution?			posed to concentr	ate prior to dilution?
Formulation Topical solution		Formulation Topical solution			Formulation	
Evidence label directions were not followed? Yes Intentional misuse No	Evidence label directions were not followed? Yes Intentional misuse Incident site: (Exschool, industrial surface water, colbuilding/office, for (specify crop), ri		al, nursery/greenhouse, ommercial turf, orest/woods, agricultural		Situation (act of using product): (examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).	
Applicator certified PCO?		Home		See Ir	ncident Desc	ription Notes
How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff).	of incident circumstan	oces	1			
	Address 3701 SW Comus St PORTLAND Oregon 97219 USA Phone # Incident Status: New If update, include date of original submission EPA Registration # (Prod 11556-152 A.I. (s) Imidacloprid-Py Product I name Advantage II La Exposed to concentrate p Formulation Topical so Evidence label directions were not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill,	Address 3701 SW Comus St PORTLAND Oregon 97219 USA Phone # 50378129: Incident Status: Location and dat New If update, include date of original submission EPA Registration # (Product 1) 11556-152 A.I. (s) Imidacloprid-Pyriproxyfen Product I name Advantage II Large Cat Exposed to concentrate prior to dilution? Formulation Topical solution Evidence label directions were not followed? Yes Intentional misuse No Incident site: (Exposed to concentrate prior to dilution? Formulation Topical solution Evidence label directions were not followed? Yes Intentional misuse No Brief description How exposed: (examples include direct contact with treated surface, ingestion, spill,	Address 3701 SW Comus St PORTLAND Oregon 97219 USA Phone # 5037812999 Incident Status: New If update, include date of original submission I1-18-2020 EPA Registration # (Product I) I1556-152 EPA Registration # (Product I) Inidacloprid-Pyriproxyfen A.I. (s) Imidacloprid-Pyriproxyfen Product I name Advantage II Large Cat Exposed to concentrate prior to dilution? Exposed to concentrate prior to dilution? Formulation Topical solution Evidence label directions were not followed? Yes Intentional misuse No Evidence label directions were not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, Brief description of incident circumstance water, commercial turf, building/office, forest/woods, agricultur (specify crop), right-of-way, (rail, utilit highway)). Brief description of incident circumstance water, examples include direct contact with treated surface, ingestion, spill, Brief description of incident circumstance water, examples include direct contact with treated surface, ingestion, spill,	Address 3701 SW Comus St PORTLAND Oregon 97219 USA Phone # 5037812999 Incident Status: New If update, include date of original submission EPA Registration # (Product I) 11556-152 A.I. (s) Imidacloprid-Pyriproxyfen Product 1 name Advantage II Large Cat Exposed to concentrate prior to dilution? Formulation Topical solution Formulation Topical solution Exposed to concentrate prior to dilution? Exposed to concentrate prior to dilution? Formulation Topical solution Formulation Topical solution Formulation Topical solution Formulation Topical solution Formulation Formulation Topical solution Formulation Topical solution Formulation Topical solution Formulation Formulation Topical solution Formulation Topical solution Formulation Formulation Formulation Formulation Topical solution Formulation Formulation Formulation Formulation Topical solution Formulation Formulat	Address 3701 SW Comus St PORTLAND Oregon 97219 USA Phone # 5037812999 Incident Status: New If update, include date of original submission 11-18-2020 EPA Registration # (Product 1) 11556-152 A.I. (s) Imidacloprid-Pyriproxyfen Product I name Advantage II Large Cat Advantage II Large Cat Advantage II Large Cat Exposed to concentrate prior to dilution? Exposed to concentrate prior to dilution? Evidence label directions for the followed? Were not followed? Were not followed? Were not followed? Were to followed? Were not followed? Wer	Address 3701 5W Comus St PORTLAND Oregon 97219 USA Phone # 5037812999 Incident Status:

Version: 20-Nov-2020 at 14:53

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans Provide all known, required information. If required data field information is unknown, des

Provide all known, required information.	.i required data freid information is di	richown, designate as such in appro	opriate area. Page 3 of 3
Demographic information: Age: 58 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Male		Suicide/Hornicide?	
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
	If yes, days lost due to illness:	1 Days	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) permethrin cream	List signs/symptoms/adverse effect Dermatitis and eczema Erythema Dermatitis and eczema Skin lesion NOS	s	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data: Amount of pesticide: Unknown per 1			
Expose duration: 0 day(s) Patient weight: 200 Pounds			
Human severity category			
H-C			
		[-,	Internal ID #
			moinas (D r
			2020-US0059506

Version: 20-Nov-2020 at 14:53

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1	Reporter Name		Submission	Contact person (if different than reporter			Internal ID#	
Administrative Data	Ms Theresa Mil	ler	date. 12~16-2020	Not Applicable		2020-US0059731		
	Address 141 C141 Commodor Dr NWommodor Dr NW Mitchell Georgia 31061 USA			Address USA				
	Phone #	Phone #						
	Incident Status: New If update,include date of original submission	Incident Status: Location and date New If update, include date of				ate registrant Was incident pa came aware of cident.		
		09-01-2020		11-18-	- 2020			
Row 2 Pesticide(s) Involved	EPA Registration # (Product 1) 11556~155		EPA Registration # (EPA Registration # (Product 2)		EPA Registration # (Product 3)		
	A.I.(s) Flumethrin-Imid	acloprid	A.I. (s)			A.I. (s)		
	Product I name		Product 2 name		Pro	duct 3 name		
	Seresto (unspecified)							
	Exposed to concentrate p	rior to dilution ?	Exposed to concentrate prior to dilution?			oosed to concentr	ate prior to dilution ?	
	Formulation Collar		Formulation			Formulation		
Row 3 Incident Circumstances	were not followed? school, industrial surface water, conbuilding/office, for		d, nursery/greenhouse, includ mmercial turf, applic prest/woods, agricultural maint		including m application, maintenanc	uation (act of using product):(examples luding mixing/loading, reentry, plication, transportation, repair, intenance of application equipment, nufacturing/formulating).		
	Applicator certified PCO?		Home		See Incident Description Notes			
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, rumoff). See Incident Description	of incident circumstan	ces	<u> </u>				
	L							

Version: 3-Dec-2020 at 10:57

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 3 of 3

			1
Demographic information: Age: 62 Year (5) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify) ?
Sex: Female		Salvido no interido .	
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms;	
No	If yes, days lost due to illness:	4 Hours *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect Dizziness Nausea Malaise Emesis Ataxia	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:	Ataxia		
Amount of pesticide:	Ear pain		
Unknown per 1	Dyspepsia		
Expose duration:			
0 Days			
Patient weight:			
UNK			
Human severity category			
H-C			
This box can be used to provide any expl	anatory or qualifying information su	rrounding the incident, (add addition	onal pages if necessary)
		Ī	nternal ID #
		Ž	020-US0059731

* approximate

Version: 3-Dec-2020 at 10:57

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Row 1	low 1 Reporter Name		Submission Contact p		on (if differe	Internal ID#		
Administrative Data	Ms Patricia Bo	lden	date. 12-16-2020	Not Provided		2020-US0059951		
	Address 11575 Fisher Rd BON AQUA Tennessee 37025 USA			Address USA				
	Phone #	Phone #	`					
	931670576 Incident Status: Location and date New If update,include date of original submission		e of incident. Date registrant became aware of incident. 11-23-20		e of	Was incident part of larger study		
Row 2 Pesticide(s) Involved	09-01-2019 EPA Registration # (Product 1) 11556-155		EPA Registration #	EPA Registration # (Product 2)		EPA Registration # (Product 3)		
	A.I.(s) Flumethrin-Imida	A.I. (s)		A.1	A.1. (s)			
	Product I name Seresto Dog (un	Product 2 name		Pro	Product 3 name			
	Exposed to concentrate p	Exposed to concentr	ate prior to dil	ution? Ex	Exposed to concentrate prior to dilution			
	Formulation Colla	Formulation			mulation			
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Evidence label directions school, industria surface water, conbuilding/office, for		ıl, nursery/ greenhouse, in mmercial turf, a orest/woods, agricultural n		Situation (act of using product):(examples including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).			
	Applicator certified PCO?		Home	Home See		ncident Desc	ription Notes	
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident			eces				

Version: 2-Dec-2020 at 07:07

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans Provide all known, required information. If required data field information is unknown, designate

Provide all known, required information, i	T required data Heid information is the	nknown, designate as such in appr	ropriate area. Page 3 of 3
Demographic information; Age: Adult	Exposure route:	Was adverse effect result of suicide/homicide or attempted suicide/homicide?	Was protective clothing worn (specify)?
Sex: Male Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
	If yes, days lost due to illness:	2 Hours *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient) medical induced coma,	List signs/symptoms/adverse effect Systemic disorder NOS Convulsion Anaphylaxis	S	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:			
Amount of pesticide:			
Unknown per 1			
Expose duration:			
0 Days			,
Patient weight:			
UNK			
Human severity category	4		
Н-В			
			Internal ID #
			2020-US0059951

Version: 2-Dec-2020 at 07:07

- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
- 2. Fold the printed label at the solid line below. Place the label in a UPS Shipping Pouch. If you do not have a pouch, affix the folded label using clear plastic shipping tape over the entire label.
- 3. GETTING YOUR SHIPMENT TO UPS

Customers with a Daily Pickup

Your driver will pickup your shipment(s) as usual.

Customers without a Daily Pickup

Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS

Schedule a same day or future day Pickup to have a UPS driver pickup all your CampusShip packages. Hand the package to any UPS driver in your area.

UPS Access Point¹⁵ THE UPS STORE 13851 W 63RD ST SHAWNEE ,KS 86218 UPS Access Point^{IM} ADVANCE AUTO PARTS STORE #5998 11818 SHAWNEE MISSION PKWY SHAWNEE ,KS 66203

UPS Access Point?M HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 86216



- 1. Ensure there are no other shipping or tracking labels attached to your package. Select the Print button on the print dialog box that appears. Note: If your browser does not support this function select Print from the File menu to print the label.
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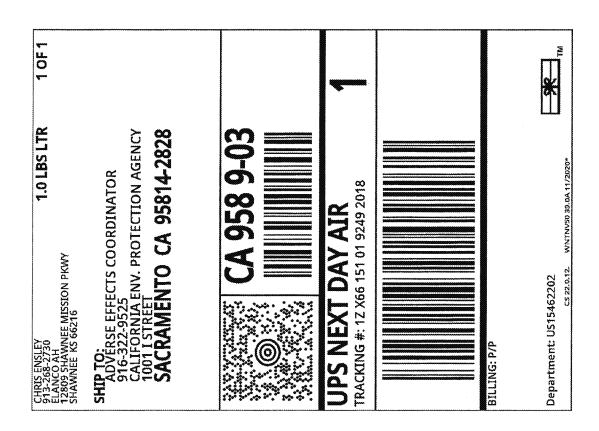
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UPS Access PointTM
HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216



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UPS Access PointTM
HYPER COMPUTER AND BATTLE GAME
11941 JOHNSON DR
SHAWNEE ,KS 56216



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UPS Access Point**
HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 56216



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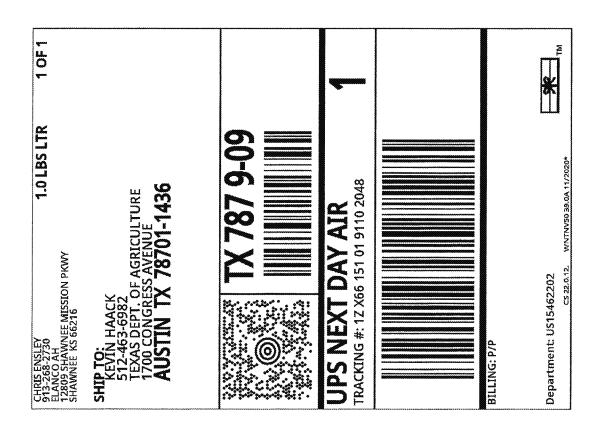
Take your package to any location of The UPS Store®, UPS Access Point(TM) location, UPS Drop Box, UPS Customer Center, Staples® or Authorized Shipping Outlet near you. Items sent via UPS Return Services(SM) (including via Ground) are also accepted at Drop Boxes. To find the location nearest you, please visit the Resources area of CampusShip and select UPS Locations.

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ADVANCE AUTO PARTS STORE #5998
11818 SHAWNEE MISSION PKWY
SHAWNEE ,KS 65203

UPS Access Point^{FM} HYPER COMPUTER AND BATTLE GAME 11941 JOHNSON DR SHAWNEE ,KS 66216





January 28, 2021

U.S. Environmental Protection Agency Document Processing Desk - 6(a)(2) Office of Pesticide Programs - 7504P Room S-4900, One Potomac Yard Arlington, VA 22202-4501

SUBJECT: 6(a)(2) Incidents Accumulated for Month of December, 2020 Dear Sir/Madam:

Elanco US Inc PO Box 390 Shawnee Mission, Kansas 66201-0390

Please find additional Elanco US Inc. 6(a)(2) incidents accumulated during the month of December, 2020. These incidents are being submitted in accordance with FIFRA Section 6(a)(2).

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: Elanco report nos:

2020-US0062371, 2020-US0062390

Chin Endy



January 28, 2021

Adverse Effects Coordinator

Department of Pesticide Regulation

Pesticide Registration Branch 1001 | Street, PO Box 4015

Sacramento, CA 95812-4015

SUBJECT: 6(a)(2) Incidents Accumulated for Month of December, 2020

CCR Section 6210 Submission

Adverse Events Coordinator:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Elanco Us Inc PO Box 390 Shawnee Mission, KS 66201-0390

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

- Lung W.

Encl: U.S. EPA letters dated January 28, 2021 with attachments.



January 28, 2021
Labelle Hicks, Ph.D. DABT
Maine Board of Pesticides Control
28 Statehouse Station
Augusta, ME 04333

SUBJECT: 6(a)(2) Incidents Accumulated for Month of December, 2020.

Dear Dr. Hicks:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc., incidents attached and submitted pursuant to

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated January 28, 2021 with attachments.



January 28, 2021

Paula McBath, Environmental Chemist II

Pesticide Product Registration Section

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-7257

SUBJECT: 6(a)(2) Incidents for Month of December 2020 Section 326.14 (f) Reporting

Dear Paula McBath:

Enclosed please find Elanco's letters addressed to the U.S.

EPA with the descriptions of Elanco US Inc. incidents attached and submitted pursuant to FIFRA 6(a)(2).

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

July will

Encl: U.S. EPA letters dated January 28, 2021 with attachments.



January 28, 2021

Mr. Kevin Haack

Texas Department of Agriculture

Pesticide Registration Program

Stephan F. Austin Building

1700 No. Congress Ave., Austin, TX 78701

SUBJECT: 6(a)(2) Incidents Accumulated for Month of December, 2020

Dear Mr. Haack:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted pursuant to FIFRA 6(a)(2).

Shawnee Mission, KS, 66201-0390

Elanco US Inc

PO Box 390

Please feel free to contact me at chris.ensley@elancoah.com or at 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: U.S. EPA letters dated January 28, 2021 with attachments.

Row 1	Reporter Name Ms Kimberly Coogan		Submission	Contact person (if different than reporter Not Applicable		nt than reporter)	Internal ID#	
Administrative Data			date. 01~28~2021			.e	2020-US0062371	
	Address 9401 Water Fern Circle Clermont Florida 34711 USA			Address USA				
	Phone # 352~552-58088			Phone #				
	Incident Status:	Location and dat	e of incident.	Date registrant became aware of incident.		of No		
	If update, include date of original submission	12-06-2020	12-1		-2020			
Row 2 Pesticide(s) Involved	EPA Registration # (Prod	iuct 1)	EPA Registration #	Product 2)		EPA Registration # (Product 3)		
	A.I.(s) Imidacloprid-Pyriproxyfen		A.I. (s)		A.1	A.I. (s)		
	Product I name Advantage II Me	Product 2 name			Product 3 name			
	Exposed to concentrate p	Exposed to concentrate prior to dilution?			Exposed to concentrate prior to dilution?			
	Formulation Topical solution		Formulation			Formulation		
Row 3 Incident Circumstances	Evidence label directions were not followed? Yes Intentional misuse No	lowed? 'es misuse Incident site: (Examples include home school, industrial, nursery/ greenhous surface water, commercial turf, building/office, forest/woods, agricultu (specify crop), right-of-way, (rail, util			including mixing/loading, reentry, application, transportation, repair, maintenance of application equipment, manufacturing/formulating).			
	Applicator certified PCO?		See Incident Description Notes					
	How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Description	Brief description	ces					

Version: 18-Dec-2020 at 16:44

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 2 of 3

Internal ID # 2020-US0062371 Brief description of incident circumstances

On approximately 03-Dec-2020, a 48 year old, 137 pound, woman, in unknown condition, with the concomitant medical conditions of an allergy, a food allergy, celiac disease and a hiatal hernia, was secondarily exposed to an unknown amount of Advantage II Medium Dog (Imidacloprid-Pyriproxyfen) on the hands when she pet her dog that had the product applied on approximately 30-Nov-2020.

On approximately 06-Dec-2020, the individual experienced skin warmth on the face, erythema on the face, a burning sensation on the ears, tongue edema, lip edema and a sore mouth. She self administered diphehydramine and prednisone, that she had on hand in the home.

On 13-Dec-2020, she experienced confusion, dehydration and weight loss. She was examined by a physician, was diagnosed with an allergic reaction and was started on an unspecified antihistamine and 20 mg prednisone.

On approximately 14-Dec-2020, she experienced lethargy. Symptoms continued.

Version: 18-Dec-2020 at 16:44

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans

Provide all known, required information.	if required data field information is u	inknown, designate as such in app	propriate area. Page 3 of 3
Demographic information: Age: 48 Year(s) -	Exposure route:	Was adverse effect result of suicide/homicide or attempted	Was protective clothing worn (specify)?
		suicide/homicide?	(Spoots) / i
Sex: Female	0.4.4	N.	
Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
Unknown to Company	If yes, days lost due to illness:	3 Days *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect Tongue disorder Erythema	ts	If lab tests were performed, list test names and results(If available submit report). None reported
benadryl and another	Erythema Mental confusion		none reported
Exposure data:	Dehydration		
Amount of pesticide:	Oral pain		
Unknown per 1	Paraesthesia		
onknown per 1	Allergic oedema		
Expose duration:	Weight loss	ion	
0 Days	Hypersensitivity reacti Lethargy	OB .	
Patient weight:	Le char By		
137 Pounds			
Human severity category			
H-C			
This box can be used to provide any expl	landa and a selection of the selection o		h()
			Internal ID#
			2020-U50062371

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 1 of 3

Ms Kimberly Coc	vaan	date.	i			
Ms Kimberly Coogan		01-28-2021	Not	Not Applicable		2020-US0062390
Address 9401 Water Fern Circle Clermont Florida 34711 USA			Address USA			
Phone # 352-552-58088			Phone #			
Incident Status:	Location and dat	te of incident. Date registrant became aware of incident.			Was incident part of larger study?	
original submission	12-06-2020		12-14-2020		No	
EPA Registration # (Prod 11556-125	-		Product 2)		EPA Registration # (Product 3)	
A.I.(s) Imidacloprid-Pyriproxyfen		A.I. (s)		A.I	A.I. (s)	
Product 1 name Advantage II Medium Dog		Product 2 name		Pro	Product 3 name	
Exposed to concentrate prior to dilution?		Exposed to concentrate prior to dilution?		ution ? Ex	Exposed to concentrate prior to dilution?	
Formulation Topical solution		Formulation		Foi	Formulation	
Evidence label directions were not followed? Yes Intentional misuse No	l, nursery/greenhouse, include applic applic prest/woods, agricultural maint		including m application maintenance	ation (act of using product):(examples uding mixing/loading, reentry, lication, transportation, repair, atenance of application equipment, ufacturing/formulating).		
Applicator certified PCO?		See Incident Description Notes				
How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident	Brief description	ces	<u> </u>			
	9401 Water Fern C Clermont Florida 34711 USA Phone # Incident Status: New If update, include date of original submission EPA Registration # (Prod 11556-125 A.I. (s) Imidacloprid-Pyth Product I name Advantage II Med Exposed to concentrate put Formulation Topical so Evidence label directions were not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff).	9401 Water Fern Circle Clermont Florida 34711 USA Phone # 352-552-58 Incident Status: New If update, include date of original submission Location and dat New If update, include date of original submission 12-06-2020 EPA Registration # (Product 1) 11556-125 A.I. (s) Imidacloprid-Pyriproxyfen Product I name Advantage II Medium Dog Exposed to concentrate prior to dilution? Formulation Topical solution Evidence label directions were not followed? Yes Intentional misuse No No Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Brief description	9401 Water Fern Circle Clermont Florida 34711 USA Phone # 352-552-58088 Incident Status: New If update, include date of original submission I2-06-2020 EPA Registration # (Product 1) 11556-125 A.I. (s) Imidacloprid-Pyriproxyfen Product I name Advantage II Medium Dog Exposed to concentrate prior to dilution? Evidence label directions were not followed? Yes Intentional misuse No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Brief description of incident circumstant (specify crop), right-of-way, (rail, utilithing), spill, drift, runoff). See Incident	9401 Water Fern Circle Clermont Florida 34711 USA Phone # 352-552-58088 Incident Status: New If update, include date of original submission 12-06-2020 EPA Registration # (Product 1) 11556-125 A.I. (s) Imidacloprid-Pyriproxyfen Product 1 name Advantage II Medium Dog Exposed to concentrate prior to dilution? Evidence label directions were not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Phone # 352-552-58088 Phone # 254 Product 1 EPA Registration # (Product 2) EPA Registration # (Product 2) A.I. (s) Incident Status: Date registration became awas incident. Date registration became awas incident. Product 1 EPA Registration # (Product 2) A.I. (s) A.I. (s) Formulation	9401 Water Fern Circle Clermont Florida 34711 USA Phone # 352-552-58088 Incident Status: New If update, include date of original submission 12-06-2020 EPA Registration # (Product 1) 11556-125 A.I. (s) Imidac loprid-Pyriproxyfen Product I name Advantage II Medium Dog Exposed to concentrate prior to dilution? Formulation Topical solution Evidence label directions were not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident See Incident	9401 Water Fern Circle Clermont Florida 334711 USA Phone # 352-552-58088 Incident Status: New If opdate, include date of original submission 12-06-2020 EPA Registration # (Product 1) 11556-125 A.I. (s) Imidacloprid-Pyriproxyfen Product 1 name Advantage II Medium Dog Exposed to concentrate prior to dilution? Exposed to concentrate prior to dilution? Formulation Topical solution Evidence label directions Incident size: (Examples include home, yard, swere not followed? Yes Intentional misuse No Applicator certified PCO? No How exposed: (examples include direct contact with treated surface, ingestion, spill, drift, runoff). See Incident Brief description of incident circumstances

Version: 7-Jan-2021 at 11:53

Voluntary Industry Reporting Form for 6(a)(2) Adverse Effects Incident Information

Provide all known, required information. If required data field information is unknown, designate as such in appropriate area.

Page 2 of 3

Internal ID # 2020-US0062390
Brief description of incident circumstances

On O6-Dec-2020, an 18 year old, 189 pound, man, in unknown condition, with no known concomitant medical conditions, was secondarily exposed to an unknown amount of Advantage II Medium Dog (Imidacloprid-Pyriproxyfen) that was applied to a dog on approximately 30-Nov-2020. No known direct contact occurred.

Approximately 30 minutes post exposure, the individual experienced skin warmth on the ears, erythema on the ears and hives. He self administered diphenhydramine and took a shower. Approximately 1 hour post onset, the symptoms resolved and he recovered without medical intervention.

No further information is expected. The case is closed.

Version: 7-Jan-2021 at 11:53

Voluntary Industry Reporting Form for 6(a)(2) Information Involving Humans Provide all known, required information. If required data field information is unknown, des

Demographic information: Age: 18 Year(5) -	Exposure route:	Was adverse effect result of	Was protective clothing worn
		suicide/homicide or attempted suicide/homicide?	(specify)?
Sex: Male Occupation (if relevant)	Other	No	
If female, pregnant ?	Was exposure occupational?	Time between exposure and onset of symptoms:	
	If yes, days lost due to illness:	30 Minutes *	
Type of medical care sought (examples include none, clinic, hospital emergency department, private physician, PCC, hospital inpatient)	List signs/symptoms/adverse effect Urticaria Erythema Erythema	8	If lab tests were performed, list test names and results(If available submit report). None reported
Exposure data:			
Amount of pesticide:			4
Unknown per 1			
Expose duration:			
0 Days			
Patient weight:	-		
189 Pounds	PROCESSOR AND ADDRESS AND ADDR		
Human severity category			
H-C			
This box can be used to provide any expl	anatory or qualifying information su	rrounding the incident. (add addi	tional pages if necessary)
			Internal ID #
			2020-US0062390
			2020-030002330

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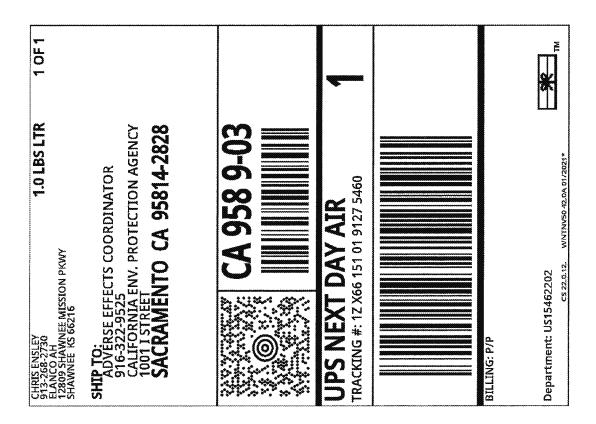
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February 23, 2021

U.S. Environmental Protection Agency

Document Processing Desk - 6(a)(2)

Office of Pesticide Programs - 7504P

Room S-4900, One Potomac Yard

Arlington, VA 22202-4501

SUBJECT: 6(a)(2) Incidents Accumulated for Month of January, 2021

Dear Sir/Madam:

Please find additional Elanco US Inc. 6(a)(2) incidents accumulated during the month of January, 2021. These incidents are being submitted in accordance with FIFRA Section 6(a)(2).

Please feel free to contact me at chris.ensley@bayer.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Encl: Elanco report nos:

July Endly

There were no incidents during this time frame to report.

Elanco US Inc PO Box 390 Shawnee Mission, Kansas 66201-0390



February 23, 2021
Adverse Effects Coordinator
Department of Pesticide Regulation
Pesticide Registration Branch
1001 I Street, PO Box 4015
Sacramento, CA 95812-4015

SUBJECT: 6(a)(2) Incidents Accumulated for Month of January, 2021 CCR Section 6210 Submission

Adverse Events Coordinator:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted to FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Elanco Us Inc PO Box 390 Shawnee Mission, KS 66201-0390

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

July Enely

Encl: U.S. EPA letters dated February 23, 2021 with attachments.



February 23, 2021
Labelle Hicks, Ph.D. DABT
Maine Board of Pesticides Control
28 Statehouse Station
Augusta, ME 04333

SUBJECT: 6(a)(2) Incidents Accumulated for Month of January, 2021.

Dear Dr. Hicks:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc., incidents attached and submitted pursuant to

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

FIFRA 6(a)(2). Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

July rich

Encl: U.S. EPA letters dated February 23, 2021 with attachments.



February 23, 2021

Paula McBath, Enviromental Chemist II

Pesticide Product Registration Section

New York State Department of Environmental Conservation

625 Broadway

Albany, NY 12233-7257

SUBJECT: 6(a)(2) Incidents for Month of January 2021 Section 326.14 (f) Reporting

Dear Paula McBath:

Enclosed please find Elanco's letters addressed to the U.S.

EPA with the descriptions of Elanco US Inc. incidents attached and submitted

pursuant to FIFRA 6(a)(2).

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

Please feel free to contact me at chris.ensley@elancoah.com or 913-268-2730,

if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

freez ml

Encl: U.S. EPA letters dated February 23, 2021 with attachments.



February 23, 2021

Mr. Kevin Haack

Texas Department of Agriculture

Pesticide Registration Program

Stephan F. Austin Building

1700 No. Congress Ave., Austin, TX 78701

SUBJECT: 6(a)(2) Incidents Accumulated for Month of January, 2021

Dear Mr. Haack:

Enclosed please find Elanco's letters addressed to the U.S. EPA with the descriptions of Elanco US Inc. incidents attached and submitted pursuant to FIFRA 6(a)(2).

Please feel free to contact me at chris.ensley@elancoah.com or at 913-268-2730, if I can provide any additional information, or to be any further assistance.

Respectfully,

Elanco US Inc

Chris Ensley

Regulatory Affairs Specialist

Thu Evely

Encl: U.S. EPA letters dated February 23, 2021 with attachments.

Elanco US Inc PO Box 390 Shawnee Mission, KS, 66201-0390

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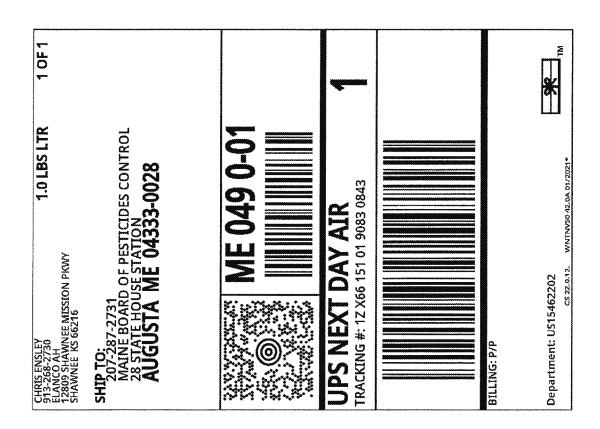
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